Note

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Hæmatemesis

Hæmatemesis is a discharge of blood from the stomach - It may be distinguished from Hæmoptysis by its never being preceded by any pulmonary affection - no dyspnea - pain or oppression - the blood far from being florid & frothy is dark & grumous - brought up by vomiting - and usually mixed with some of the contents of the stomach. It may be produced by all the general causes of Hæmorrhage - those from which Hæmatemesis more particularly arises are concussions - local injuries - as blows - hard drinking - the operation of violent emetics - acids & poisons - cold taken suddenly into the stomach as very cold water & ice cream - when it arises from these sources it is idiopathic but we often meet with it sympt-tomatic - from obstructions - in the Liver & spleen - or vicarious of some suppressed evacuation - as Hæmorrhoids - Menstrual &c. Treatment — If the pulse indicates it - we must bleed - then we should administer tart. Alum. Tinc. Ferri - Sacc Saturni - Spirit turpentine is the best with the Hæmorrhage idiopathic or symptomatic two doses of 10 or 20 gts then repeat coming in contact with the bleeding vessels act promptly - cold drinks have been highly recommended - but I cannot speak of them from from my own experience - Hæmatemesis is sometimes combined with extreme irritability of the stomach - and constant vomiting - blistering is here our first remedy - and answers a two fold purpose - relieving the stomach & checking the flow of blood If it be necessary we can apply our remedies to the rectum - but if emetics - Hence say Chap - is the best - give 20 gts if this does not act 10 gts more Chap - has often seen this relieve when the patient was in a comatose state from the loss of blood - when the other means had failed this medicine - is so much practical importance

I have never met with a case in which the necessity strongly existed after stopping the Hemorrhage we must examine & ascertain whether it proceeds from visceral obstruction - or is vicarious of some other discharge - and then proceed with the plan of cure suited to the particular case

A species of Hemorrhage which occurs in females about the age of puberty - it has been asserted - has been very successfully treated by purgatives - Hamilton thinks it arises from constipation of the bowels - but I think vicarious of menstrual flux - as all the cases I have ever seen - were connected with obstruction or retention however in Chlorosis with which it is often combined - we know that purgatives are the best remedies & in both cases have been resorted to with too great caution - I proceed next to speak of the disorders of the respiratory system - - - - - - - - -

Respiratory system

the diseases mostly arise from checked perspiration

Catarrh

It consists in a discharge of fluid from the mucous membrane of the throat - bronchia & nostrils - with some fever attending - caused by vicissitudes of the weather - by a change in kind or quantity of cloathing - and indeed every sort of exposure calculated to suppress perspiration - Catarrh commences with some difficulty of respiration - or sensation of fulness and pain in the head - the distillation of an acrid fluid from the eyes & nostrils that excoriates the parts with which it comes in contact - there is lassitude & chilliness or a preternatural sensibility of cold - a sense of roughness or soreness in the trachea - stricture across the chest -

with dry cough - in a few days if the patient if he is not ill managed he gets well - and this is preceded by a looseness of the cough - and free ex-
-pectoration of a thickened mucous - But cases are not rare where either the original violence of the attack or from mismanagement - it puts on far worse symptoms - hence we should never neglect this disease as it may advance & assume any the appearance of any of the anginose affections & in old persons Catarrhal - Suffocatio - Dyspnoea - Consumptio - hydrothorax - asthma & may follow

Dissections show the plura covered with coagulable lymph - Lungs adherent to the ribs & congested with blood in children & old people - in recent cases inflamatio - great secretion of pituitary fluid

Treat in the forming stage commence with laudanum - or going to bed all the good effects are obtained ~~or going to~~ by perspiratio - he soon feels a sensatio over the whole body but if this from idiosyncrasy or the cause cannot be taken - then use a fodilavium with 1 qt hicory ashes in it & mild diaphoretics Lyes Nitro Sulc - & hot wine acidulated by warm lemonade - tea &c - also inhalations of Hoffmans anodyne & laudanum - with by Dr Physick - This inhalatio overcomes the

the slight infla— of the membrane of the trachea acting as a counter astringent or may give cicuta or Ether inpuing 3ß - & inhaling — for drink Balm tea — Barly water — Molasses & Vinegar whey made as wine whey — If not relieved by next day purge with neutral salts & keep the bowels soluble by taking throughout the day the following Mixture

℞ — Sulph Soda ʒ.1. Nitras Potassa — ʒß.
Tartar Antimonii gr.1. Aqua Pura ℥.3.

When confined with fever & delirium to the head & copious V.S — q.r.n. — In Europe Emetics are used — in some cases if early may answer but if pain & inflamation exist — rather prefer V.S. — Blisters only in the declining stage — when there is little pain & cough — When the disease is broken cough loose & free — use expectorants to aid it — if used before this they aggravate the symptoms & Laudanum too early causes congestion

Cough Mixtures — as the brown mixture of opium — Ant — wine & Paregoric

℞ Ext of Liquorice ʒ.3. warm water ʒ.4. Ant vini . ʒ.1
Syrup Vit. Dulc. ʒ.2. Laudanum 12. gtts. Paregoric. q.r.n.

℞ Oxymel Scilla ʒ.1. Vini Ant — ʒ.1. Gum Arab — ʒ.2.
Syrup Vit. Dulc — ʒ.2. Tinct Thebaica 12. gtts. Aqua ℥.5.

℞ Sal Tartari ʒ.1. Vini Ant — ʒ.1. Aqua ℥.4.
Tinct of Thebaica 40. gtts. Syrup Lavender ʒ.2. &c &c — — —

Regimen – In the early stage – low & abstinious as possible – Flax. seed or bran tea – vegitable jellies made by simmering barly or g. arabic in a cloth slowly – which forms a jelly – add acid & sugar. Keep him to his room & if possible to his bed in persons subject to take cold keep burgundy pitch plaister habitually to his chest – Principally a vegitable diet – vegitable soup & hominy – Vegitable soup made by taking 2. potatoes. 2 turnips – 1. onion or a little parsley – slicing & boiling to a jelly in one pint of water

Catarrhus Epidemicus

or Influenza – This has also been termed "La grippe" It was known to the old writers & in the earliest periods It generally begins in the north & spreads rapidly to the south – but sometimes the reverse – arising from some unknown state of the atmosphere depends on some disease & not contagious – It obliges all diseases to assume its character which is inflamatory – Sometimes appears in warm weather particularly to the south – Treat – the same as laid down in Catarrh – but extended – unless a typhoid state supervenes & this depends on the gastric derange In our southern county it assumes a billious character & the treatment must be modified accordingly – We have resort to the employment of emetics –

this disease is very analogous to Catarrh — the mucous membrane of the prima via is inflamed the causes are different — catarrh generally proceeds from some sensible quality in the atmosphere as cold — moisture &c while on the other hand Influenza is not produced by these — but must be ascribed to some peculiarity in the air — Contagion has been said to be its mode of propogation but I think this opinion entirely gratuitous — during its progress persons completely secluded — as Monks, crews of ships at sea &c have all at once become affected — It is governed by all the laws of Epidemics — recurring at stated periods — sweeping rapidly over whole continents & compelling all other existing diseases to succumb its divery

Phthisic Catarrh is that species which goes on to Catarrhal Consumption — there may be ulceration of pituitary mucous membrane without solution of continuity — & may not end in Phthisis

Tuberculosis of lungs

Cynanche Trachealis or croup

also called hives – but Trachetis is better (It was first noticed by Home of Edinburgh in 1765 – most common betwn the 1st & 5th years & in those of robust make – have known it within the month – in adult age ~~in these habits~~ – Washington is said to have died of it – yet from the change of puberty it seldom occurs after that period It is Epidemic or Endemic – from cold – moisture &c – is plain opposed to the sea air & dampness – but is never contagious – It often attacks in the night after having gone to bed well – It with a dry tiresome cough – Is divided into Spasmodic & Inflamatory but in the cure there is no difference – I think when it occurs suddenly it is by spasmodic contraction & when gradual in its progress by inflamation as well as when dependant on other inflamations as measels &c – It attacks variously some without any premonitory symptoms – at other times for several days previous the child is restless & uneasy – whines – cries & has copious defluxions from the eyes & nose with cough which is easily known from the peculiar barking like that of a dog or cock – the Dyspnoea – suffocation tivid face – anxiety & absence – of swelling about the throat & pains – such are spasmodic & terminate fatally – It is generally worse at night

Diagnosis – Cynanche Trachealis – Pneumonia Notha & Vera – complicated with Mess – to distinguish the two forms is of importance

see Box this overleaf these called Bronchitis

Treat as soon as called if only give an emetic & bleed do recommend large vomiting — Vomit with Emetic & Ipecac combined & at short intervals — When calomel is added to them they never fail to vomit — at the same time use warm bath for 12 or 15 minutes — If no relief repeat the Emetic & Bath — — may then be given some juice of Garlic — apply leeches & cups to back of the neck — Blisters or Sinapisms must never be placed on the throat in front — — V. S. ad deliq. animi & even where debility would forbid, nature my exhibiting packs & when syncope ensues — all symptoms cease — when the disease is broken in its force — employ calomel largely as to the dose which carries off all the remains — Should cough & Dyspnoea remain give Poligala Senéka as an expectorant — In the course of 10 hours the disease may extend to the bronchia & substance of the lungs — thus constituting a stage in which the lungs become involved — there is here a collection of mucus & engorgement of the lungs — causing dyspnoea — mottled face or livid — prominent eyes — wild haggard countenance a full pulse & some fever — great uneasiness

Time forces Bronchitis the treat — not exactly the same — when it proceeds from catarrh — there is a secretion & great discharge of mucus from the lungs — a cold clammy & pale skin

when from congestion no cough - wheezing or expectoration - but a hurried panting respiration - a full irregular & languid pulse &c - This occurs mostly in plethoric robust children - sometimes in the weak It comes on suddenly - the respiration is less oppressed if the child sinks suddenly under the attack That the indications are to relieve the lungs of appoplexy & restore the balance of circulation - Place him in the warm bath & at the same time an emetic of tartar emetic & Ipecac & calomel Some prefer Sulph zinc - or onion juice &c - In an apoplectic state bleed - but cautiously & take little blood - stop the vein for a time the let it flow again - & bleed according to the effects - If dangerous substitute cups to the spine - & blisters to the chest or decoction of Cantharides & turpentine &c Some trust to calomel alone - The congestion is more frequently from blood than from lymph when from lymph are expectorants & squills - Antimonial wine - Polygala Senega alone or with carbonate of ammonia - Hive Lymp & calomel are usefull as expectorants Dr Rush gave bl qs in 24 hours considering it a disease of the Bronchia - extended & pouring Pulp - Notta - The Pathology is in general wrong The diseases of children are more inflammatory

(Dr Chapman thinks the practice in this disease is not sufficiently active it should be decided - children will bear a great deal - our remedies often make matter for the child or disease - but are neutral)

during a remount of Phlog use topical bleedings

— thin nature & require direct depletory measures
Sometimes a membrane is formed in the trachea
of coagulable lymph — now in bronchotomy always
successful — Never despair of a recovery — in the
as the disease has most nearly reached the lungs
successfully several times it has been extracted
commencement if attacked with croup it is gener-
by an operation — for this the mustard plaster have
-ally manageable — As a rule — never leave a
been used &c so that it may be carried out
child until you medicines have made an
impression on the disease — When death occurs
suddenly no marks of inflamation are found
heaving of the shoulders & throbbing or thumping of the heart
(very bad signs)

Pulmonary Consumption — — — —

Confessedly no case of disease is involved in more
obscurity & there is no one in which the powers of our
art are exercised with less certainty or advantage
It would appear that our want of success in the treat-
-ment of this disease is partly owing to inherent
difficulties of a very formidable nature & is also
perhaps in some degree attributable to ourselves
an error in the ~~things~~ which constitutes undoubtedly
the worst case of pulmonary consumption is necessa-
-rily very intractable in the cure from the loose
& parenchymatous structure of those organs — The
same happens in all parts made up chiefly of cellu-
-lar tissue — The difficulty arising from this cause
is aggravated by the movement of the lungs in respiration

We include under one head a great variety of pulmonary affections & apply with no discrimination the same practice to these diversified complaints – My deliberate conviction is that this sweeping sort of generalization has produced vast mischief in this as in numerous other cases of disease & the first step to upon both in the theoretical & practical views of the subject before us, is to contemplate it in its more minute & distinct aspects. –

The word Phthisis signifies a wasting or distruction & when applied to a pulmonary affection denotes an ulcerated condition of the lungs – – – – – – –

But unquestionably the case commonly considered as consumption may exist in its course & that fatally without the slightest ulceration of these organs – Cullen tells us that pulmonary consumption is emaciation & debility of body – with cough – Hectic fever & a copious expectoration of pus – – – – – – – – –

By Boyle it is laid down that every organic affection of the lungs which, left to ~~themselves~~ itself produces this progressive disorganization succeeded by ulceration & finally by death should be considered a Phthisis pulmonalis –

The latter appears to me defective in many respects & especially because it excludes all diseases which however they may resemble consumption in-

all this symptoms are unattended by ulceration
No practitioner will ever meet the complaint
so unequivocal as it is in all its characteristics with-
-out recognizing it - though when called to conclude
on all its varieties under one definition he would
find himself embarrised . . . . . .

Tubercular Consumption - the only true form of Phthisis

Before proceeding to describe the symptoms of this
case I will say a few words on the nature & appear-
-ance of those bodies which are supposed to be the cause
of consumption . . . . . .
as the name imports they are small masses of indurated
white or gravish substance formed in the lungs - espe-
-cially in the upper posterior part . . . . . .
By Stahl who has given the best account of these - it is
said - that in dissections of persons who have died of this
disease - tubercles are found in the lungs of all ag-
-es from that of the smallest grain to the bigness of
horse beans - that they are generally met with in consi-
-derable numbers - on cutting into them they appear
of a white smooth cartilaginous nature - In the
smallest no cavity or opening whatever exists - but
in such as are farther advanced minute apertures
like pinholes are discoverable - The tubercles

which are still larger have one or more cavities — containing a fluid like pus — which being removed small openings are perceptible at the bottom — which on pressure between the fingers — more purulent matter may be forced out — The larger tubercles on being opened are found to be mere capsules or reservoirs into which enters a branch of the bronchia affording passage for the matter expectorated — — — — — — — — — — — —

It has been supposed ~~that~~ generally that they are intimately connected with a Scrofulous diathesis — & by some it is alleged that they are the mere enlargement of Lymphatic glands — the latter of these is not correct — — — — — — — — — — — — — — — —

By the dissections of Boyle a late French writer on the subject it appears — that they are occasioned by deposition of matter from the capillaries of the Lungs & that sometimes they are cheesy, sometimes cartilaginous — sometimes even osseous — — Thus formed the tubercles remain for a great length of time sometimes for many years, indolent & inactive with little or no inconvenience to the patient at length however excited by the ordinary causes of inflamation pulmonary consumption commences — at first the tubercles merely enlarge — become red & more vascular in the involving membrane — then in the centre a minute cavity is formed into

which is found a small quantity of illconditioned pus ---
This cavity gradually increases & converts into abscess
-es denominated ancient Tonica - These bursting discharge
their contents into the bronchia which is copiously ex-
-pectorated - After the rupture of the abscess the ulce-
-ration rapidly advances till finally the whole substance
of the lungs is destroyed or involved in one mass of
disease - It is now that Hectic fever makes its appear-
-ances - It sometimes happens that only one tubercle
at a time takes on suppuration & under such
circumstances the progress of the disease is exceedingly lingering & protracted - Now & then the ulcer heals and a
temporary remission or suspension of the disease encour-
-ages the hopes of an immediate recovery - but on the
next exposure to the exciting causes - one or more tu-
-bercles inflames & a repetition gravently of the pre-
-ceding symptoms takes place & then the case runs on
till at length the patient becomes exhausted & sinks
under the disease - a patient will sometimes go on
in this way for years - One of the tubercles becomes
inflamed & goes through all the stages - the abscess
bursts - the ulcer heals & for some time the pa-
-tient may appear well & remain so untill exposed
to the exciting causes - another tubercle or more
takes on inflamation & runs through all the stages
of the first & when a number of tubercles are

also stop at the same time the patient becomes exhausted

List of cases that occurred in the Hospital at Paris

Yrs		Yrs		Cases
from 15	to	20		10
20		30		23
30		40		28
40		50		21
50		60		18
60		70		08
				101

debauchery or excess in eating or drinking — the suspension of accustomed evacuations or hemorrhoids & certain states of the air & peculiarities of the climate

Symptoms tubercles are one of the most invidious forms of the disease — the history of this I will read from Duncan's work on the subject — See Duncans work — P. 22-26

Besides these peculiarities many always associated with the disease complaint — there is a peculiarity in the conformation of the body — as a long delicate neck — narrow chest — prominent shoulders — and as united to these high cheek bones — a delicate complexion — light hair — a thin skin — large prominent veins — tumid upper lip — feeble voice — great sensibility & quick vivacity of mind & in short all those the signs denotes high pulsous & irritation — — — — — — — — — — — — —

which is [illegible] a small quantity of illdigestable [illegible]

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of the first & when a number of tubercles are

affected at the same time the patient becomes exhausted & dies -

Causes of the exciting exciting causes of consumptions generally the most common are Catarrh & ill cured pneumonic inflamatio repelled eruptions - certain sedentary ~~complaints~~ occupations & particularly such as the require the body to be habitually bent - or in which acid or irritating substances are thrown off & inhaled into the lungs, stone cutting - milling - grinding of needles - or working in metals - To these may be added playing much on wind instruments debauchery or excess in eating or drinking - the suppression of accustomed evacuations or hamorrhoids & certain states of the air & peculiarities of the climate

Symptoms tubercles are one of the most invidious forms of the disease - the history of this I will read from Duncan work on the subject - See Duncans work - P. 44-46

Besides these peculiarities many always associated with the disease complaint - there is a peculiarity in the conformation of the body - as a long delicate neck - narrow chest - prominent shoulders - and as united to this high cheek bones - a delicate complexion - light hair - a thin skin - large prominent veins - turnid upper lip - feeble voice - great sensibility & much vivacity of mind & in short all those the signs denoting scrofulous & cathexis - - - - - - - - - - - - - - - - - -

 The principle or leading object is plainly to arrest the progress of inflammation in the tubercles so as to prevent suppuration & its consequences & the means for this cannot be mistaken - - - - - - - Of the remedies calculated to meet this indication the most powerfull & efficacious is undoubtedly venesection - recommended by Dr Dover - that is the commencement that a moderate quantity of blood should be taken away each day for 4 or 6 days in succession & after this every 2 or 3 days for a much longer time - so that in some cases he bled the patient about 50 times - but the abuse of this remedy caused its disuse - Rush revived it - - - - - - - - - - - - - I need not remark that in this as in all other cases we should be governed in the use of the lancet by the condition of the pulse & by those other circumstances which assist us in obtaining a knowledge of the state of the system as circumstances which should always influence you in the employment of venesection you may bleed to any extent & you will have cordid pulse & sizzy blood - you should always bear in mind, on the one hand, the vast importance of early subduing inflammation & on the other hand the extreme debility which attends the case & the tendency of the remedy to hasten & increase this

condition of exhaustion - - - - - - - - - -

After you have bled your patient as far as you may deem it prudent or even as a contemporaneous & aiding remedy you may resort to topical bleeding with signal advantage For this purpose cups are generally preferred - If from the circumstances of the case you wish to avoid bleeding altogether - dry cupping has been found of the greatest utility from 40 to 50 are to be applied to the whole chest & this number repeated every 3 or 4 days - These & blisters are generally more successful when the disease is caused by repelled eruptions - The manner in which the remedy acts is this - it directs the blood from the lungs to the surface & thus obviates inflamation & by the irritation they excite produce to a certain extent effects analagous to the vesicating applications. The immense advantage of establishing some counter irritant in this complaint has long been known & acknowledged - This may be accomplished either by a blister a seton an issue or any thing of a similar character but a blister is decidedly to be preferred

The remedies next in importance in this stage of the disease are emetics - (not combined with nauseants) - they are exceedingly useful - They do good by equalizing circulation & promoting abscription - They also facilitate expectoration & in some degree equalize the excitement of the body - - - - - - - - - - - - - - - - -

Most practitioners have generally preferred Ipecac - but what is called dry vomit consisting of equal parts of blue vitriol & tartarized antimony has also been greatly extolled - . . . . . .
By Simmons - the blue vitriol has likewise been greatly recommended - do not know that it has any advantage over Ipecac
Emetics perhaps do good in these cases by the universality of their impression - To be of service however Emetics must be frequently repeated - perhaps 2 or 3 times in the course of a week & continued in this way for several weeks in succession - By the frequent repetition of the remedy you imitate the effects of a sea voyage - I think few patients will submit to this plan of treatment pushed so far
Vitriolated copper has been proposed as an emetic - it is said to be little more than an evacuant of the stomach as a part of this same plan of treatment it is very customary at this stage of the complaint - to resort to those articles calculated to reduce the force of the circulation
By some practitioners the saline purgatives are prescribed for this purpose & though sometimes exceedingly beneficial - any excess in this operation must be carefully guarded against as it is always productive of mischief in every variety of pulmonary complaint

you should be content with merely keeping the bowels open
It is a much more common & perhaps safer course to meet the indications by antimonials in minute doses alone or in combination with nitre — What is denominated the antimonial powders without calomel will answer very well — for several years past Mercury has been highly extolled in every stage & form of pulmonary consumption — It was employed by the celebrated Dr Radcliffe in the case of William the 3d — also used by Morton
That mercury has occasionally been of service in chronic pulmonary affection there can be no doubt — But not one of these cases was genuine (I am persuaded) or tubercular consumption — it is mischievous in every stage of hereditary or tubercular consumption
Digitalis is only useful in the incipient stage of Phthisis for more of this see Therapeutics Vol 2nd — P. 241
These are the principle remedies employed in the early stage — The prussic acid has been proposed by Magendie and much employed — some report favourably of it & others deprecate its use — the article is sub-judice. — though its reputation is on the decline
But when the disease is not arrested — abscesses in the manner already described & hectic fever with its horrible concomitants takes place — The case may now be considered (in my opinion) as entirely beyond the power & control of medicine & must inevitably

 evitably prove fatal - - - - - -

When we cannot cure we may sometimes palliate & it is always right that the remedies which appear adapted for this purpose should be fairly tried - The leading indication at this conjuncture is to remove the Hectic fever which is so debilitating & exhausting in its effects - - - - - - - - - - - -

But as to the nature of this affection as well as the best remedies suited to it - I formerly treated fully & at present nothing remains to be said - - -

Of late the practice has been revived in Europe & this City in attempting to heal all ulcers of the lungs by inhaling the vapour of certain vulnary & balsamic articles - My own experience is not satisfactory. Though I will not condemn the practice The articles employed for this purpose are the turpentine preparations & the Balsam of Tolu - By Flahl oxide of antimony was used - But candour compels me to say that I have never been able to use them without being injurious - Even Sulphur & Mercury both excite cough & thus very much aggravate the complaint -

Dr Mudge recommended the fumes of vapour of Ether & Tar - The Tar is to be placed in an earthen vessel over a lamp or heated iron to promote volatilization till the room or ward is fully im-

fumigated with the fumes - this process to be repeated 3 or 4 times each day - Tar is the article of all others which has the strongest claims to our attention & confidence - - - - - - -

Dr Physick has proposed opening the thorax that the lung collapsing might be at rest & thus afford the ulcer an opportunity to heal - - - - - - - - - - - - -

On the same principle as that of the others just mentioned the inhalation of atmospheric air variously diluted & combined with inspirable gases has been recently highly recommended - the remedy proved wholly unavailing - Butchers never scarcely have the complaint - as Tubercular consumption advances & particularly in the final stages of it - certain affections arise of a nature so urgent as to demand particular attention - as these are symptomatic all that we can do is to palliate Night sweats as these arise from debility of the exhalants are more effectually checked by stimulating these vessels - By sleeping in flannel alone I have known the effect to be produced & especially if the surface is rubbed with some stimulating article as Warm Brandy or Salt 3ss - to one pint of brandy

Of the internal remedies perhaps the best are the mineral acids - especially the Sulphuric - which is given in form of Elixir of Vitriol - This may be

the acid alone or in combination with the Peruvian Bark or the vegitable bitters or astringents Alum - Lac - Lat - - Arsenic have also been recommended - Now & then I have derived advantage from Creta Ppt or Oyster shells - or what is perhaps still better is lime water freely taken I have known the mildest diuretics as eating water - mellons or drinking parsley tea or even cold water to give considerable relief - under these circumstances this mode of operation consists in the diversion of action from the surface of the body to the urinary organs - We often check Diarrhoea by active purging & on precisely the same principle the more powerfull diuretics may prove beneficial in the case before us

as regards Diarrhea another of these affections I shall treat of it in another place as a disease of itself & therefore shall dismiss it ~~with a few words~~ in this place - & observe that the best remedy for colliquative Diarrhoea is an anodyne injection or an opium suppository - It is proper however to state purging at this period of pulmonary consumption is very particularly mischevous from the extreme exhaustion it so rapidly induces & hence should be checked as rapidly as possible - To mention this is more important because at the close of Pulmo-

-nary consumption Diarrhoea is very apt to suspend the cough & alleviate some of the other symptoms so that if not apprised of its insidious consequences - the patient as well as the practitioner may be induced to let it run on to a very dangerous extent - I have seen by indulging Diarrhoea or active purging - a cough Dyspn-&c completely suspended - But while the symptoms seem thus relieved it was exhausting the ~~life~~ powers of life, which must soon have proved fatal had it not been stopped

At this stage the cough which throughout is troublesome becomes considerably aggravated & calls for relief Most of the mixtures mentioned under the head of Pneumonia Hotta & catarrh are here useful - The preparations of nitric acid - the milk of Gum Ammonia are exceedingly so & especially if there is much Dyspnoea & oppression After all we must chiefly rely upon opium as a remedy for cough given alone or in various combinations - There is a property in opium independent of its narcotic power which is of great benefit in this advanced stage of the disease

When the cough is exceedingly troublesome - attended by Dyspnoea great advantage is derived from inhalations or vapour of warm water - which is more effectual by the addition of certain

articles —
is exceedingly well adapted to these cases of accumulations in the lungs chest from debility in the lungs or retained by the tenacity of the matter
It is in this stage of the disease that there is anorexous extremities with burning sensations
Aphthae also may appear

Sulphuric Ether a teaspoonfull inhaled into the nostrils I speak with confidence of the utility of this remedy — The vapour of the Vol. Alk. also I am inclined to believe when inhaled it will be advantageous in elimination of the pulmonary organs
Not altogether dissimilar to the above remedies is the smoking of certain articles — Tobacco is one of these I have seen the stramonium smoked with great utility: all these are however mere palliatives
concentrated Prussic acid — Chap. therapeutics —

Catarrhal Consumption or chronic catarrh

Unlike the tubercular it occurs unprecended by any constitution-al affections & is seated in the membrane lining the trachea & bronchia - It begins, a Catarrh, and may indeed be consider-ed as a more protracted case of that disease - there is a tense pulse cough pain in the side or breast - not acute soreness of the throat which appears to be occasioned by the repeated coughing - The expectorated matter is at first mucus. but after a while it becomes purulent there is however no ulceration - Dissections shew that this pus is a morbid secretion from the internal lining of the trachea & bronchia, the lungs are hardly ever af-fected - Another peculiarity of catarrhal phthisis is that is never attended with Haemoptysis - if the expectora-tion is ever mixed with blood it is only in streaks - cau-sed by the rupture of some minute vessel - The indications of cure here are the same as in tubercular consumption but this disease being of a more inflamatory character & the constitution is a state of greater vigour - direct depletion is now loudly called for & should be carried much further than in the former instance - I shall not now repeat what I so lately said on the subject - Emetics are in this form of phthisis most effica-cious - but they must be resorted to when we hope to cure Phthisis for some time steadily employed - After the febrile action is a little reduced Mercury should also be resorted to & the system kept under its influence for several weeks - If it should fail it will never prove detrimental in any of these cases

Diagnosis not easy from Tubercular consumption - See do

Prognosis on the constitution & diathesis

Apostheumatous Consumption

or that arising from an abscess in the lungs it always seems as a consequence of pneumonic inflamation — Pleurisies — wounds & other injuries — There is deep seated pain in the chest — dyspnoea violent — cough — expectoration of mucus untill the abscess is emptied — when matter is coughed up. In the early stage the treatment is precisely the same as in Catarrhal consumption — but I would here from the beginning employ mercury to produce salivation of I to prevent abscess this is the remedy most effectual in putting a stop to the inflamation of the great viscera & its efficacy is so manifest that I habitually resort to it in protracted pleurisies — Whenever there seems any danger of the disease running into this state — do not neglect or delay to administer mercury The abscess being formed which is known by the chills & rigors &c it is important to discharge the matter & then to heal it — the abscess generally breaks spontaneously or may be hastened by the exhibition of an emetic — After this a free expectoration should be promoted by inhaling the steam of water & vinegar or Ether & the treatment should be the same as in tubercular consumption — I have derived unequivocal advantage from a mixture of Nitric acid & ammonia — see the properties of Nitric & ammonia from the efficacy of Nitric acid in healing ulcers on other parts of the body — from analogy we might expect it to be useful here — The prophylactics in consumption next demand our attention — all the more favourable climates & by the common consent of physicians, a dry equable & regular climate is to be preferred — this has been broken through — Vaughan sent his patients into miasmatic countries — to render them liable to an attack of intermittent

fever - I cannot exactly tell the results - we have it on traditional evi-
-dence that it was not without success - the doctrine lately taught by
several medical men, that intermittent fever is a despotic disease - in-
-compatable with the existence of others rooting out all other actions from
the system & more particularly that of consumption - It is alledged
that in Devonshire the mildest & most temperate part of Great-
-Britain consumption prevails to a great extent - while there is not a
solitary case of ague & fever to be met with - In Lincolnshire which is
low & moist the state of things is just the reverse - Intermittents prevail
to an alarming extent - while consumption is there unknown -
Physicians practised to find every where a confirmation of this
opinion - In Holland which you all know is peculiarly a
fenny country - ague & fever is the common disease & consump-
-tion is not known - Dr Crochan says the same with respect Flan-
-ders - In Egypt also intermittent prevails - but no consumption
In Italy of all climates the most mild - equable & temperate
consumption prevails to a most alarming extent - in those parts
which are covered by a sky of perpetual serenity - But in the
fenny districts & especially where rice is cultivated - it is unknown &
ague & fever is common - But notwithstanding all the weight
of evidence I by no means wish to press this opinion upon you
we must require a greater weight of indisputable authority be-
-fore we can give up our ancient prejudices on this subject
which seem to be confirmed by experience - There is little
doubt among physicians that a mild & equable climate is to be
preferred as the residence of the consumptive - but the spot is
difficult to fix upon - Phthisis may be met with in

those parts of the world which have been thought free from it - France in general - Paris - Lyons - Montpelier - all Italy - Lisbon - the Island of Madeira - which have been so celebrated on this account constitute no exception the Europeans now send their patients to the south of Spain - to the county about Valentia - In the U. States send our patients to the W. India isles of which Bermuda deserves the preference - none of them are however free entirely from phthisis - This disease is found in all parts of our country - along the coast of the atlantic & particularly in New York & the more eastern States - Every part of our climate is expedingly variable & have hardly safe for the consumptive during the winter season - There is the least objection to the interior of Georgia or New Orleans - on the whole considering the great inconveniences & equivocal utility of removing - it is perhaps better to keep the patients at home & confine them to a chamber which is kept of regular temperature (between 65° & 68°) must has been effected from a sea voyage & is undoubtedly of advantage in the early stages - but I have no doubt that it hastens death not unfrequently in the advanced stages of the complaint - among the prophylactics - exercise is the chief particularly on horseback - Sydenham speaks of this with great confidence & experience justifies his commendations - but it must be resorted to with discrimination Being both stimulant & tonic if employed while the pulse is full & febrile action existing - it will hasten the march of the disease - But when the system has been regularly prepared for it - it is of the greatest advantage - The diet should

be light & of easy digestion & not calculated to produce heat or excitement — the best article is milk either alone or mixed with some of the farinaceous — the exciting causes of this disease should be studiously avoided & above all every exposure to cold — to guard against this worm clothing must be continually worn — flannel should be worn next the skin — I have told you that one species of consumption is incurable & although in the other species cures are now and then effected — yet these instances are very rare & as we can have no confidence in our remedies in the management of this disease — it is our highest & most sacred duty to endeavour by the prophylactics I have mentioned to prevent the formation of this Dreadful Malady

Pneumonic Inflamation or

of this genus of disease Nosologists have made many different species & called them by different names — according to the parts in which they are located — thus inflamation of the Pleura is called, Pleurisy of the Parenchyma of the Lungs Peripneumony — engorgement or suffocation of this organ from great influx of blood — peripneumonia Notha & they call a rheumatic affection of the part — Pleurodinia — When the part of the pleura covering the diaphragm is inflamed — it is called Paraphrenitis — & is marked by delirium &c — These distinctions are too trifling to be retained, the division of the subject which I have made is merely into — Pneumonia Notha — & Pneumonia Vera — the second of these includes pleurisy & peripneumonia — between which two there is some difference — though we have no diagnostics as Cullen remarks — by which we may distinguish them from each other

Symptoms These are pyrexia - difficulty of respiration - dry cough - pain in some part of the thorax - in the side or some part of the breast - these symptoms are variously modified in the different cases - Causes - these are all the vicissitudes of weather - the direct application of cold - especially when the body is heated the disease selects the robust of habit & vigorous constitution - in whom an inflamatory diathesis prevails - It prevails mostly in winter & spring - particularly when the weather of these seasons is inclined - of all our ailments that which is best understood & most easily curable, is the one now under consideration - it is of a high & active inflamatory character & the indications are few & very intelligible - there is no doubt with regard to the treatment during the first stage - every one employs copious & prompt venesection - even the prejudices of the common people are enlisted in its favour - so much so indeed - that whatever be the circumstances opposing bleeding in any case - name it but pleurisy & it is at once uncorked - called to such a case we directly draw blood very freely & from a large orifice - it is a fact perfectly well ascertained - that the suddenness of detraction has much influence in reducing arterial action - thus it is said that the loss of 10 oz of blood flowing quickly is of as much service as the gradual loss of 20 oz - I believe that infinitely more mischief has been done by the timid employment of the lancet - than by any excess in its use - there would be no Hydrothoraces - Phthisis - or chronic complaints of the thorax were the symptoms of pleurisy - bodily rest as they ought -

Pleuritis — symptoms - diagnosis - prognosis

treatment

In a stout adult with a strong pulse & much pain & difficulty of respiration 3 lb of blood may be taken away at once & shall probably prove to repeat the operation within a few hours though perhaps not to the same extent — my plan is not to tie up the arm in a violent case untill the pain remits & the respiration is relieved It is of no consequence whether in attaining this object 15 or 20 oz are taken away — but this rule will not apply to the advanced stage of the complaint — after inflamation has continued for a few days the capillary vessels become affected, independent in some measure of the heart & great vessels & no general loss of blood will have any effect on them — many examples in support of this doctrine might be adduced it is proved by all the appearances occasioned in phlegmasias — we can hardly ever cure an ophthalmia or rheumatism without topical depletion & the same holds good in pneumonia But we must not too soon without the lancet — inflamation of the lungs requires bear the loss of more blood than any other disease it is impossible at the commencement of an attack of pleurisy to produce syncope in this way I have seen 40 or 50 oz of blood taken at once in these cases without producing syncope

Local Remedies — First of vesications — there has been much difference of opinion among physicians — concerning the period at which it is proper to apply blisters & some respectable writers have denied their utility — but there is no doubt of their efficacy when timely applied It is my practice to postpone them untill arterial action is somewhat reduced

See pathology — P. M. Ex. desunt

ced by depletion — then they are unequivocally useful — by extinguishing the remaining inflammation & completing the cure — when applied earlier than this they aggravate the symptoms they were intended to relieve on this point however many respectable physicians differ among these are Dr Gippitt of this city & Dr Jackson of Boston two very able & eminent men & whose practice is very extensive I have only to say that my experience (which I never surrender to any man) tells me that the course I have recommended to you is sound & correct practice — cupping sometimes acts like a charm & may be resorted to again & again

I wish to call your attention — particularly to topical depletion — when we have employed the lancet as far as is safe the pulse often retains its activity & the inflammation continues — here the loss of P. or S. or by leeches or what is infinitely better by cups is of admirable advantage — when neither of these are to be obtained as may be the case in the country we must apply dry warmth in the form of hot bags of hot salt — hot oats &c the pulmonary affections constitute an exception to the general rule of the efficacy of purging — but the bowels must be kept in a soluble state by the means of some mild laxative as castor oil or Epsom salts — Diaphoretics — in this class of remedies much confidence has been placed — but experience has taught me that they are not to be exclusively trusted to in these cases however a sweat just at the commencement of an attack has undoubtedly often prevented it a medicine which has gained much reputation for its efficacy in this way is the Asclepias Incarnatus — the common milk weed in the south do not purge enough & that with nursing — especially after antimonial em

pleurisy root my experience is much in its favour - it is a certain & active diaphoretic - without any consequent stimulant effect - it is of great advantage in all the inflamatory diseases of winter - during the continuance of the complaint now under consideration - however diaphoretics are at present rarely employed - the best are combinations of Nitre & Emetic Tart - & Ipecac &c - I am not aware that the production of some degree of nausea is injurious I think rather the contrary as this tends rather to remove the constriction of the chest & assist expectoration - - When the cough becomes loose & free the disease is broken & we are to treat it as originally a case of catarrh by the cough mixture &c. But it sometimes happens that a dry cough continues with pain & stricture - here we cannot employ a better prescription than a combination of opium - Ipecac & Calomel & no mischief is ever done by salivation - I do not know indeed whether it would not be sound & good practice in all cases of the kind to induce a moderate degree of salivation - this would be the best guarantee against relapse or the formation of new diseases as Phthisis &c Enough has now been said to serve as a general rule in your practice - I leave the rest to your own sagacity & experience - there is one form of the complaint so common among us that I cannot omit saying a few words concerning it I allude to -

plaints - a bilious discharge is critical

Bilious Pleurisy

To the symptoms of pleurisy already enumerated - are in this case added many of those belonging to our autumnal fevers as head-ache - red eyes - tumid countenance - gastric disorder with vomiting of bilious matter & a dark furred tongue - Bilious pleurisy is of a less inflamatory character that the common fevers & will not bear so much direct depletion - the system is often depressed by one or two bleedings - if we perceive that the first blood letting causes any sinking - we must desist from it altogether - the alimentary canal must be evacuated by laxatives & purgatives of the mercurial class & often this & conjunctive moderate bleeding we should give draughts of the infusion of senpentaria so as to keep up a steady diaphoresis - this medicine is peculiarly adapted to the case under consideration on many accounts - the disease appears generally in miasmatic countries & retains in some degree the intermittent type - the efficacy of senpentaria in intermittent has been spoken of - as well as its efficacy in putting a stop to bilious vomiting - It is also a good tonic & Diaphoretic both which properties are well applied here - it is now universally conceded in in the second stage of bilious pleurisy - the respiration often remains difficult - with pain in the chest - the circumstances forbid venesection we must resort to cups leeches & a blister over the breast - Treating pleurisy as I have described I have found it as manageable in my practice as ordinary cases - - -

Pneumonia Notha

or bastard peripneumony

As regards the nature & treatment of this affection there is much difference of opinion - but the fact is that two different diseases are confounded under this title - which require very different modes of treatment - the first is Catarrhus Notha. a suffocative this disease usually attacks old & feeble persons or children attended with panting & very laborious respiration - recumbent posture - bowels inactive & prodigious accumulation of mucus in the lungs - the disease runs its course very quick - the cause is extreme atony & debility of the pulmonary organs. Treatment if the patient be not too weak we must resort to venesection but very cautious & moderate - desisting & watching the effect of the first bleeding & according to this repeating it - or laying it aside altogether. If bloodletting cannot be performed or is of no avail - an emetic must be given - much is to be expected from active vomiting - Ipecac or White Vit - is to be preferred as from their great promptness of operation & other supposed properties which they possess - they are peculiarly appropriate - We must next apply a blister large enough to cover the whole thorax - This it may not be adequate to the removal of the disease entirely - it always mitigates its violence & alleviates all the symptoms - topical depletion is of unequivocal advantage - cupping is to be preferred & is of more service when performed on the back - In this ~~or in all the~~ case Opium is to be freely given in all stages - in all the stages of the complaint - it is eminently useful when given alone - but is more commonly mixed with some of the active expectorants in the atonic stage as Squills - Rhei &c - In the other form of Pneumonia Notha to which I alluded - the lungs are blue there is fever are apprehensive - warm water inhalation see his therapeutics inhalation

2 Congested with blood constituting what may be called Pulmonary Apoplexy - this often comes on very suddenly - generally at time attacks those debilitated by debauchery & persons in advanced life - Wo - it sometimes attacks the young - the robust & temperate - the symptoms are impeded respiration - a dull heavy pain in the chest - a flushed countenance - a wild suffused eye - very great anxiety & restlessness & in violent cases - a total inability in the patient - to change his position - pulse early compressible From the pathology of the disease which I have taught you - there is no hesitation as to the treatment - we must resort in the first place to the most copious & prompt venesection - not less blood should be drawn than in the congestion of the brain itself - the case is urgent & relief must be given before we close the orifice of the vein -
I have known ℔ l ℥ thus taken at the first bleeding - But cases frequently occur in the infirm in which this mode of treatment would not be safe - so large a proportion of the blood in the body being taken out of the general circulation & confined in the lungs that that a small quantity detracted from a vein - will produce immediate depression of the system - From patients in this way it will be best to take away a little at a time - if he bears the loss well - it may be repeated - if he pinches & gives or declines vomit & faints desist - — topical bleeding by cups - in very advantageous - after this a liberal dose of opium is to be administered in combination or a effective & a large blister applied to the chest - Inhaling the vapour of different articles is also useful - as of simple warm water - or Ether or tobacco 1 ℥ of which may be put in a pint of hot water & the steam inhaled - the fumes of Rosin &c all these act by rousing the lungs from their torpor & enable them to perform their functions properly - ——

Asthma

This disease has been commonly considered a spasmodic affection of the lungs. It attacks in paroxysms which often observe stated intervals - but sometimes does not strictly preserve this periodical type cases are recorded of its recurring daily - weekly - monthly & even at quotidian intervals - The causes of Asthma are of two kinds - such as act directly on the lungs & such as produce their effect indirectly through the medium of the general system - Of the first kind are acrid matters dispersed by inhalation to the lungs or the vapour of lead - arsenic & certain very pungent odours - the smell of Ipecac (a medicine very useful in this disease) in some persons always brings on an attack I know a student of the late Dr Barton's - who could not weigh out 13 of Ipecac without being thus affected - a case of precisely the same nature is recorded in an old volume of the transactions of the Royal Society of London - to these may be added the various inspirable gases & particularly the carbonic acid gas - Different states of the atmosphere - consisting either in its sensible qualities - or its occult & insensible properties the air of the country & suburbs is far more pernicious than that of crowded cities - & the air of cities varies much with regard to this - without any sensible difference in the qualities of the atmosphere thus the air of Baltimore is found to be favourable to the production of asthma - whilst that of Philadelphia is much to the contrary & patients often remove for relief from the former to the latter place - experience having proved the change beneficial - The causes which act indirectly through the medium of

204 of the general system — may mostly be traced to ~~a wrong~~ some im-
-pression made on the alimentary canal — indigestable food
inanition — or too great fullness — constipation of the bowels & the sup-
-pression of any natural evacuation — the suppression of eruptions as the catamenia — as ulcer pu-
-tulosity — the metastasis of other diseases &c These may all be considered as exciting
causes — awakening a predisposition in the constitution — hereditarily
derived or owing to conformation of the chest — The paroxysm of
asthma usually comes on after the first sleep at night — with a
sense of tightness across the breast — with a feeling as if about to
suffocate — there is no cough or if there is any it is mostly attended with
expectoration — the patient is forced to raise from the horizontal
to the erect position — flies for relief to an open window — the difficulty
of breathing increases & both inspiration & expiration are attended
with a wheezing — the voice becomes very weak — any exertion to
raise it in speaking is painful — after some hours a sweat breaks out — a
good deal of mucus is ejected in the lungs — & the cough & expectoration
are free — the other symptoms also subside — These exacerbations hap-
-pen every night for some length of time & a remission takes place during the
day — the pulse during the paroxysm weak — quick & small — but
it is sometimes entirely altered from its natural state — the urine
is at first very copious & pale — but after a while it becomes
very high coloured — depositing on standing a lateritious sediment
the face may be either pale or shrunk or flushed & tinged — this
disease is undoubtedly an hereditary one — more commonly met
with in the male than in the female sex — seldom supervening
before the age of puberty & mostly making its attacks in hot wea-
-ther It is generally preceded by torpor — lassitude — drowsiness

Diagnosis not very difficult
prognosis not very

& the symptoms of Dyspepsia — The Pathology of asthma is very little understood — Cullen attributes it to contraction of the muscular fibres of the Bronchia — which produces the disturbance in respiration — to which all the other troublesome affections ensue — a late writer, however of considerable ingenuity tells us — that it most commonly arises from irritation in the air cells of the lungs — from some acrimony directly applied to them or from an accumulation of serum in them — but it is evident at least in one part of his theory he has mistaken the effect for the cause — Dissections have not as yet afforded us much information on the subject — after sudden death from asthma the lungs are perfectly healthy in appearance — except in cases of long standing — in which Morgagni tells us they bear the marks of morbid affections & this we should before hand suppose probable. as we know that the complaint most frequently runs into Hydrothorax or Phthisis Pulmonalis — I think there is always present a spasmodic constriction of the lungs — which may be secondary — to some disorder of the stomach & bowels which produces asthma & the other symptoms which I have detailed as consequences — But there is sometimes a secondary affection originating from some impression made on the alimentary canal Asthma is divided into two species the Spasmodic & the Humoral the first is called dry & occurs mostly in early life — the second is called pituitous & is met with oftener in more advanced life — I do not know whether these distinctions are sufficiently uniform to admit of the divisions commonly made — I cannot say that I think them important in practice — In my opinion a more correct distinction would be into Idiopathic & Symptomatic Treatment this is naturally divided into such as is necessary during the paroxysm & such as is necessary during the intermission — in all people the heart especially & the lungs have been found much deranged

2 Remission. In the first instance our object is to eradicate the disease in the second to prevent its recurrence. To the eye of the practitioner venesection seems to be imperiously demanded by the interrupted state of the circulation through the lungs & from many other circumstances — but it is an ambiguous remedy & condemned by most writers — even by its most strenuous advocates it is allowed that it is productive of much less benefit than might have been expected — My settled conviction however is that tho' our anticipations may not be fully answered in violent cases — still blood letting is useful & often indispensable — In the inflamatory stage & in plethoric habits it does good — not only by producing present relief — but also by preventing those organic affections of the heart & lungs — which are so apt to follow this disease — here the pulse is not to be trusted as our guide — all the circumstances must be taken into consideration & particularly the sufferings of the patient — Cases do occur where V.S. is absolutely prohibited & in presence of debility & is of no service — in which we may resort to the application of cups to the back — this topical depletion is of signal advantage — Emetics have been objected to by some practitioners — but the objections made seem to be very frivolous — I habitually prescribe them in any case of pneumonia or rheumatism — Vomiting alines the pneumogastric & if well timed — will often prevent its recurrence — Ipecac — is to be preferred here to all other emetics & medicines — its application to asthma originated with Akenside — the Poet & Physician — he gave it during the paroxysm in the dose of 20 grs in order to afford immediate relief & in the interval from 3 to 5 grs (in the morning) to effect a complete cure — whether in these small

does - it produces vomiting or not he tells us it is equally efficacious
Cullen differs from us in the use of emetics promiscuously in the
two species of the disease - he thinks though they may be useful
in the Humoral they are injurious in the Spasmodic affection
Squills have been much used & I think are likely to do good
especially in cases of old people - combinations of this medicine
with Ipecac are said to be vastly superior to either of them
when given alone - I have never employed them in union
It has been a subject of much dispute whether it is better
to vomit or nauseate - I think this should be determined
according to circumstances - to break the violence
of the attack - vomiting is best adapted - but when we
wish to assist expectoration - we should prescribe nauseating
doses & to effect this purpose Ipecac is generally the best medicine
but for old people with strong of the lungs the most stimulating expectorants are to be selected
as Squill. Senega - & in these cases I have found the following
formula serviceable - ℞ Liq. Ammonia 3.3. (of the dispensatories) Wine
Acid. 1.3. Just in a mortar & stirred - dose - a table spoonfull every
hour or two as required - Purging here as in other pulmonary complaints
is of no importance - but the bowels must be kept in a soluble & regular state - as constipation alone has caused an attack of this complaint calomel is the best
There has been much dispute with regard to the exhibition of opiates - Brc thinks them always hurtful - but a discrimination
should be made with regard to the time of their administration
when given at first they are invariably mischevious - but after the disease is broken down - I am persuaded from my own
observations they are invariably useful - What I have

said of opium may be applied to all narcotics & antispasmodics, except they are inferior. Nothing seems more likely (reasoning from analogy) to be of service than the application of blisters to the chest — but experience has shown them to be of little advantage — they are said to be much more beneficial when applied to the extremities — Dr Rush used to say that blisters to the point acted like a charm — I think it would be best to substitute the Unguent. Emet. Tart. applied to the breast — this of acknowledged efficacy in the analogous disease — Angina Pectoris — among the remedies which have been found to give relief during the paroxysm are large draughts of the coldest water — hot water — strong coffee — exposed to the action of the cold air — sitting near the fire with the feet very close to it — Do not be surprised at my recommendations to you — remedies so contrary in their nature — this is not the only disease in which we use medicines or remedies diametrically opposite in their tendency — In actual practice we are often obliged to lay aside the pride of science & rely on the genuine spirit of Empiricism — to resort to that treatment which has had the sanction of experience — Inhalations of vapours have often proved of signal advantage — the steam of simple hot water is useful — efficacy much increased by the articles mentioned on a former occasion — The factitious airs or gases were during the reign of Pneumatic medicine much employed in asthma — they were commended most extravagantly particularly Oxygen by Beddoes, Thornton & other enthusiasts — the practice is "dead & gone to the tomb of all the Capulets" Stramonium the root dried & smoked in a pipe has had great reputation as a palliative I think it best adapted to spasmodic asthma dry or —

tobacco will answer at times the same purpose — I believe though again both may fail — I have never seen the violent & fatal effects result from Stramonium the European writers speak of — — — — — — —
electricity & galvanism have been used with some success
To eradicate this disease requires another mode of treatment — I proceed now to speak of the practice required in the intervals between the paroxysms — Tonics — The alimentary canal being generally disordered the management of the case should be like that of Dyspepsia & the remedies there applicable — will be equally effectual in Asthma — particularly the chalybeates — but this is the mildest form of the complaint — It is often protracted owing to effusions taking place in the lungs — & here diuretics are of advantage — as the squill — Lobelia either alone or in combination with calomel — & it is sufficiently well attested that the habitual use of Garlic is attended with great advantage — Tar given in the form of pills is of service — these to last one year in domestic practice combined — Myrrh is used alone but its powers are chaced by a union with Peruvian bark or some other vegetable ~~astringent~~ bitter or aromatic.
massive doses of & the tar pills
& be very good
The cold bath is especially useful — the stomach usually a good deal affected & gastric irritation evidently a exciting cause the diet necessarily should be strictly regulated — the vicissitudes of temperature are carefully to be avoided & for this purpose flannel should be worn next the skin — exercise & even hard labour has been known to cure — also long journeys — the exposures of a military life has cured very old asthmas — some such cases I have been acquainted with — The patient should change his residence ~~it~~ is the change is to be guided by his own experience
blisters to the extremities
constipation avoided

Angina Pectoris

This is a comparatively new complaint & was first noticed by Dr Heberden almost half a century ago – it is of rare occurrence so much so that some have doubted its existence as a distinct disease – the patient is seized while walking without any premonition – with a pain at the root of the sternum – which extends to one or both arms to the left most commonly at first not lower that the insertion of the deltoid muscle – but after several attacks extending to the very extremities of the fingers – the attack of pain at first is short – – the case concerning the pain does not come on only when the patient is walking – but can be in bed – or it is excited by the most trivial circumstances – by any mental affection – laughing – straining at stool & ascending a height produces some disturbance in the respiration – especially if the stomach be distended – This disease is preceded at times for some days with gastric affection attending symptoms are great anxiety – palpitation of the heart – laborious respiration – a sense of suffocation & other distressing symptoms – appearing to denote the immediate approach of death – This affection is mostly met with in men of a middle age – robust & corpulent – with short necks – of indolent habits & of arthritic or gouty diathesis – Our knowledge on the subject of its Pathology is not at all satisfactory – it was formerly held to be spasmodic though the part affected was not designated & this view seems to be correct – – Considering the cause symptoms & cure in many respects it resembles asthma & has been called Asthma Dorolificum & Asthma convulsivum Dr Darwin supposes is to be a species of syncope produced

Diagnosis. Asthma & Hydrothorax

and by ossification of the coronary vessels of the heart — we cannot
here see the continuation of cause & effect — nor does post mortem
show the disease — Dr Horsch attributes it to plethora of
the blood vessels — particularly a disproportionate accumulation in
the heart & large vessels — but this theory is scarcely not better founded than the
last — Allowing (which is by no means established) the fulness & inequality of the circulation contended for — I take this to be the effect of
previous irritation & excitement — rather than the cause of the disease —
& should it be the cause it would be an almost daily disease
Dissections have shed little light on this subject — the appearances
are very various — no fact can be perceived in a morbid state —
the heart is most generally diseased by ossification or elongation
or the pericardium is distended by effusion — water has been met
with in the chest — an abscess in the Mediastinum — the Hepatic
viscera are in a disordered state & the Pylorus or liver schirrous
while the heart was quite sound & in appearance perfectly
healthy — My impression is that the primary seat of the disease
is in the stomach & that it extends itself by sympathy to the or-
gans of respiration & that it is generally an hereditary or family af-
fection — I cannot now go into the consideration of this doctrine
This is not original — quite by Smith
I have seen several cases taken for angina Pectoris and in fact
who have been treated as gout
The affection of the sternum causes pain in the arms — in
Gastritis there is also pain in the arms — & in cases of Hydrothorax
a kind of stricture at the wrists is generally perceived —
Treatment — may be divided into that proper for the paroxysm &
that for the during interval — during the paroxysm keep the patient at
rest — & perfectly tranquil — the core urgent & the pulse
tolerably vigorous employ V.S. — the quantity drawn to be

212 of rubine must be large 20. or 30. oz & the case violent must repeat & perhaps to an equal extent in a short time - such an attack admits of no delay - a feeble & irresolute practice is here inevitably fatal - It is my practice to urge the lancet untill relief is obtained & as far as prudence will warrant - Vt. l. by circumstances prohibited - or be ineffectual - apply cups & blisters to the breast - open the bowels with calomel & jalap - rhubarb or - or an infusion of senna - The European practitioners pursue a course of practice diametrically the reverse - supposing the disease purely spasmodic & exhibit opium &c - - - The paroxysm fully formed can only be arrested or is more promptly subdued by Vt. l. &c after this opium &c is good - mush - etherial

The treatment during the intervals to eradicate the disease is either topical or general - Topical - all agree in the use of counter irritation - formerly by means of blisters at present the application of Emet. Tart. is preferred - it may be made into a plaster or a cloth wrung out of the watery solution may be placed on the breast = it produces a peculiar pustular eruption & seems well adapted to keep up irritation - apply stimulants to the feet

cures have been said to have been thus effected - - much is said to be derived from issues on the inside of the thigh - by McBride & Darwin - Dr Rush was in the habit of using permanent blisters to the wrists - which he thought equal to issues - - The general remedies are tonics - of these the peruvian bark & the mineral tonics are universally preferred - as the copper - Vt Al. & Vt Argent. the causes are usually

by each of these cures have been made I have not used either of them - but my plan of practice founded on the

pathology I have taught you is as follows - the patient is to a-
-void all exciting causes - the remedies suited to a atonic & disor-
-dered state of the stomach must be employed - diet light & easy of
digestion - bowels kept soluble - slight exercise by riding is per-
-ceivable either in a carriage or a horseback - medicines applicable
to dyspepsia must be resorted to - if there be any tendency to spasm
the mineral acids above mentioned must be resorted to - I
have never met with a case requiring their administration -
Pleura is to be avoided by V. L. & low living -
this plan of treatment has been in my hands attended with success
& I recommend it with confidence - you must not al-
-ways expect to cure - as cases will occur that will prove
intractable

Pertussis or Hooping Cough.

This disease usually begins like common cold - sometimes commen-
-ces abruptly & is early attended with that spasmodic sonorous crow
-from which it derives its name - at other times this symp-
-tom does not make its appearance till late in its progress & in some
cases not at all - the paroxysm consists of a number of short
inspirations rapidly succeeding each other so as almost to cause
suffocation - to obviate which violent coughing is induced -
the disease seems to arise from a specific contagion - generally
not affecting persons more than once in their lives - tho' there
are exceptions to this rule - at times also it appears as an
epidemic - spreading rapidly & extensively - & this I
think the more probable

Diagnosis - from catarrh not difficult

There has been much dispute as to the nature & seat of this disease — some contend that it affects the air vessels of the lungs — others that it is seated in the Larynx & Pharynx — others that it is primarily a disorder of the alimentary canal — with which the pulmonary system sympathizes — by some it is supposed to be a spasmodic disease — others asserted that it exhibits all the phenomena of inflammation — Till lately we knew very little of this complaint — a few years since Dr Watt treated of it very well — the result of his researches on the subject are — that all the organs of respiration are primarily affected — much in the same way as in the more inflammatory cases of catarrh — the lungs are inflamed — the air cells are found filled with a mucus or purulent matter — at some period the lungs often form adhesions to the pleura — there is also a tendency to tubercles or formed &c

Treatment — The Practice has been almost entirely empirical & I have little here to propose — a selection should be made of the numerous & diversified remedies — Two indications present themselves in Pertussis — first to subdue the violence of the disease — second to overcome the habits of perverted association — which often continue long after the cause which produced it has been exhausted — In the first stage we are to employ depletion — regulated by sound discretion & carefully watching the effect — If the child — adult — should be robust & plethoric I should not hesitate as to the propriety of V.S. — it is demanded by the intensity of the circulation in the lungs & is found to relieve all troublesome symptoms — if necessary repeat bleed especially if complicated with Catarrh

frequently — Emetics very beneficial in the early stages — in violent cases they should be repeated once or twice a day for a week or two they are not well adapted to cases occurring in advanced life — but in children they are of much service — after vomiting freely — give nauseating doses — this keeps down the fever & promotes expectoration — I prefer Ipecac — Dr Rush — the Vit. alb. — which he regarded as antispasmodic as well as emetic — constipation attends the first stage — remove it by mercurial purges — these are of more benefit than as mere purges — break the fever & shorten its course purge with Calomel 2 or 3 times in a few days at first — Blisters are useful by reducing topical inflamation — & removing the congestion of the lungs — cups especially if the head is affected — so apt to occur in this disease — Detto — cups & leeches more cups than

In the second or declining stage — — the febrile & inflamatory action pretty well reduced — opium is a palliative & of use — All the class of Narcotics — & antispasmodics are here used — give in emulsion or tincture — the musk the best & the artificial is the best of the musks — the same prop. in this disease according to some — the watery saturated solution of Assafoetida on the whole is better dose for a child of 2 or 3 years a dessert spoon full — every 3 or 4 hours the alkalies as potash & soda are employed with benefit — potash & cochineal — Line. Ipecac. with Laudanum — a favourite prescription of Dr Physick's — dose 3 or 4 gtts at a time — untill strangury is produced this generally the 3rd day when all the symptoms of pertussis disappear good in perverted association

My practice is as follows — bleed according to the state of the system — exhibit mercurial purges — if there is accumulations in the Bronchia resort to emetics — frequently repeat & in the interval give nauseating doses — for the symptoms of congestion & oppression of the lungs cup & blister — opium — is good the head opened — blister the nape of the neck

21b after the inflamatory stage as a palliative — at this period use the alkalies or solution of assafoetida last best
In the treatment must use the strict antiphlogistic plan
animal food entirely forbidden — diet low — no exposure to the air unless the weather is very mild & warm — a change of situation is of great service — especially to the sea shore
From exposure many cases of Catarrh & Pneumonic inflamation have occurred & death has ensued — I would therefore impress on you the necessity of avoiding it —
on perverted secretion — keeping up the disease — the bark — does not like it much — quinine may be safely used — perhaps it is good — arsenical solution — much doubts its efficacy — — pacchat — & nitr silver — nitre used much — sulph. Zinc — is good — — irritating liniments are of great service — especially the spine is to be irritated with on the breast good — well the emplastrum Mes respiratorium &c

Gastritis or Inflamation of the Stomach

Is divided into Phlegmonous & Erysipelatous or Erythematous — either as the one or the other coats of the stomach are inflamed — but the difference is not owing to this cause — it arises from a specific difference of action — I shall now speak only of the Acute inflamation which generally commences of the mucous tissue of the stomach — It may be excited by all the ordinary causes of inflamations — more particularly by cold variations of temperature — such as cold drinks — by stimulating or poisonous draughts — by local injuries — as blows — vomiting & by spilled or misplaced gout — & unfortunately neglect or perverse treatment

Symptoms are acute pain in the part — tender to the touch internal heat — excessive irritability of the stomach — with violent vomiting — as the disease advances the epigastric & umbilical regions become tense — great prostration of strength — the pulse is small hard cordd & not very quick.
The progress of the disorder is very rapid — when the symptoms disagree to good or the contrary a very moderate dose for it

become aggravated — debility increases — the extremities
or vague
become cold — there is fainting & weak pulse — wild eye &
often low delirium — These are usually the precursors of
Gangrene or Sphacelus — — — — — besides these there are anoma-
-lous symptoms occurring from delusive sympathy — as the pain
ball of the
& inflammation of the great ~~toe~~ — & this the only symptom — this
has been observed by myself several times — also to Dr Physic & others
Now & then it shews itself by an acute sensation in the groin alone
One of the common symptoms of yellow fever — was a paralytic
ditto in Gastritis
affection of one or both arms — The female pudendum
is sometimes inflamed — with pain & itching — at times
nervous sensibility very acute
great intolerance of light & aversion of fluid & many of the
& very difficult deglutition & a
symptoms of Hydrophobia — in which disease the stomach
is highly inflamed — The indication is obvious — from
the violence of the inflammation — must resort to V. S. independ-
-ently of the state of the pulse & apparent debility — must not de-
as after bleeding must be resorted to with more care
-lay — a few hours may make a material alteration in the is-
-sue — should detract at once 20. or 30. oz — from the arm
then large bleedings to be repeated as necessary — has seen
topical bleedings by cups & leeches
200. oz — taken — The symptoms of debility & pros-
-tration are apt to deceive us — after V. S. — blisters to the
they quiet it & prepare it for medicine
whole stomach — & it is a mistake to use small blisters
great
in this disease — Fomentations to the abdomen are of use
Sometimes must use cold where they seem to do better
The stomach so irritable that we cannot exhibit purgatives
cold & heat act nearly in the same way — after these blisters
must give large & mild injections — as 1½ pts of warm water
with a little lard — & frequently repeated — they keep the
bowels soluble — & act as internal Fomentations — — — —
Gastritis may run its course end in gangrene
& there will not be one symptom that denotes
it — this has been observed by several Jones

as soon as the stomach could bear it give some mild laxative as castor oil - or give calomel in small doses - I prefer the latter in cases where there is much irritation or it is less nauseous - & less irritating - hence may be given when no other medicine can be taken - Epsom salts are very suitable - to calm the irritation of the stomach the best prescription is lime-water & milk - the nodyne injections - I have often succeeded with the warm bath - it excites perspiration - composes the patient - calms the stomach & causes centrifugal determination - should as much as possible avoid drink & allay the thirst by very small quantities of fluid - the best is toast-water or mint tea - remarkable excellent - I feel as indicated - at this time alone, must rely on opium - the patient's sinks are carbonate of ammonia - opium in this & other cases oppose the occurrence of gangrene - if opium fails - at the same stage I with confidence recommend Ipec. tartarized - in is most strikingly advantageous -

There is another species of Gastritis occasioned by swallowing poisons - the time poison relates to the dose taken - & the condition of the person at the time of taking it - a poison in the schools of our science is "that all medicines in large doses are poisons & all poisons in small doses are medicines" - they may be treated of under the heads of ~~Narcotics & Corrosive~~ vegetable & mineral poisons - called where an overdose of opium had been taken - vomit by a combination of Emetic tartar 10 grs & Ipecac 30 grs or may use Sulph cupri - - the susceptibility of the stomach is almost destroyed must the give very large doses should they produce no effect - may perhaps succeed by distending the stomach with 2 or 3 qts of warm water - tickling refined the therapeutics for the mode of action &c

the pains with a effect — a by injection of Tartar Emetic & C.
applying cold to the head & has been cold water dashed
If we have a ~~[illegible]~~ ~~[illegible]~~ stomach pump must use it — —
on the body ice to the head & awaken the sus-
must counteract the effects of the dislodging the matter itself —
-ceptibility & the patient vomit when all other
by purgatives & stimulating clysters — moving the patient about does means had failed
not seem of very great use — cartigation might be good as we
may administer a large dose of opium to an animal & prevent
its by flogging him pretty soundly — has not found the vegeta-
-bles acids of any use as antidotes to opium — must never give until it is ejected
the Carb a aqua
ammonia is far preferable — & may be almost considered an a-
-tidote — should not be given so much as antidotes as to correct the state
Fibrile symptoms supervening — determination to the head
of the stomach after the ejection of the poison
-difficulty of respiration — treat as from other causes — but they do
but apply cups to head & the jugular vein
not bear V. S. so well — the same treatment as above to
may be opened to relieve the head — must at times
all the vegetable narcotics — except tobacco & digitalis —
resort to V. S.
opium is said to be good
when digitalis has been taken stimulate with brandy — Vol. alk.
vinegar — not to be given soon after Vol. alk as yield poison
oil of turpentine recommended by Orfila — inspiring to the extremi-
-ties — the treatment for an overdose of Mercury — when it
volatile of ammonia compositions inert
does not kill immediately as it does at times — treat as for opium
also dark on the head & body cold water — also give to drink —
must distinguish from apoplexy — by the smell of the breath — & the
other circumstances — & here must use the proper remedies as
bleeding general & topical — But it must be recollected that
where opium has been taken the system cannot bear V. S. &
depletion by other means — to the same extent — as in common fevers

The first indication in case of poison take it to
the stomach & to cause its ejection

we are told that the Turks commit suicide by drinking
a glass of vinegar after taking a large dose of opium
it becomes acetate of morphia much more active than the
same opium

Mineral Poisons.

When these poisons are taken into the stomach — we must immediately eject & here a great machine ry on antidotes & those substances calculated to the pump is very useful produce decomposition — generally a hazardous practice better to combine them with round emetic or give them after an emetic — limate is albumen — the white of eggs beat up with water or milk here are of great efficacy & render the substances our inert mass.

Verdigris or the acetate of copper — or any of the preparations of copper — antidote — sugar & water in very large quantities — it purges the offending matter off — — Muriate of Tin — Milk largely given is the best antidote — Nit. Argent. antidote — Muriate of Soda — of importance as the article has lately been much used internally — — The prep. of Lead or Baryte — give Sulph. of Soda or Sulph of Magnesia — these prevent their bad effects — — In over dose of Emetic Tartar & the other antimonial preps — give vegetable astringents — infusion of P. Bark or of green tea — The Mineral Acids — give the calcined Magnesia largely — it neutralizes them — For the Alkalies — Vinegar or the Acetic acid largely — For Arsenic there has been discovered no antidote Charcoal was once thought to be — but it is not — — — — — Would not in my own practice now would advise you to use the antidotes in preference to Emetics — when we cannot clear the noxious from the stomach — must then prescribe them — Must be careful when arsenic is taken not to admit any thing oily to be taken — as it increases the effect of the arsenic — All the mineral poisons produce inflamation of the stomach — must be treated as Gastritis in poisoning from whatever cause it is best to resort immediately to an emetic or to assist the emetic properties of the article if it is an emetic

from other causes — V.S. blisters &c — this often proceeds to a alarming extent of exhaustion — violent vomiting — low delirium excessive pain in the stomach — dimness of vision — pulse extremely low — quick ~~&~~ small & tremulous — with great horror & wretchedness — would here recommend the Spts Terebinth — merely from a speculative notion — have never used it in precisely such a case - - - - - - - - - -

generally give stimulants after the full action of an emetic — the best in general is carb of Ammonia or the aqua ammonia if there is prostration

Enteritis — an Inflamation of the intestines

The disease arises from the same causes that Gastritis arises from — & present the same symptoms — treated in nearly the same way — by the same remedies — is attended with the same degree of danger — & alike rapid in its progress has ended in a few hours in gangrene — & calls for bold & decisive practice — ~~the~~ pulse can be no guide in cutting —
the inflammation must first
It is here of much more consequence to open the bowels — con-
be subdued by V.S. otherwise purges are injurious & will be of
-stipation almost always attends — My practice is to give
no effect — should there be much real prostration may leech
a sufficient dose of Calomel — & if it is tardy in its operation
the abdomen &c
work it off with oil or Epsom Salts — the obstruction removed — keep the bowels soluble with enema or mild laxitives — — The remainder of the treat — as in Gastritis - - -

this disease is situated in the mucous tissue at first but soon extends to the other coats &c

the bowels are divided in large & small — infla of the small called duodenitis — of the large colitis — —

& the term Gastro-Enterites is now used as it is not easy to distinguish the difference between gastritis & Enteritis — & it is of no importance, pathologically they are the same — generally arise from cold &c

Peritonitis

This disease is insidious in its approach – comparatively little understood & demands somewhat a peculiar treatment. The peritoneum is liable to acute & chronic inflamation –

First of the acute – it is preceded by chills or shivering & fever – pulse small – quick & chordee – soon comes on great heat in the abdomen – also pain at times confined to one part but often over the whole belly – with great tenderness & soreness to the touch – there is thirst – dry tongue & fauces has seen the tongue moist – this very seldom happens in to or twelve hours the fullness of the abdomen is so increased that the weight of the bed clothes cannot be borne – The pulse becomes extremely quick – beating 120–130 or 140 in a minute the follows tension & swelling of the abdomen – the tongue becomes incrusted – the patient lies on his back with his knees drawn up – this posture is very constantly chosen as the disease advances all the symptoms increase – perhaps the pain may suddenly cease – very inauspicious omen – indeed always fatal – at the same time the pulse sinks & becomes very rapid – so as not to be counted – the persons vomiting or rather ejecting – of dark coloured matter resembling coffee grounds – cold clammy sweats – cold extremities the countenance haggard – & respiration difficult – immediately precede death

Dissection – reveals inflamation of every part of the peritoneum except the anterior lining of the abdominal muscles – more apt to follow early & difficult labours, the from the support being too suddenly withdrawn – & the peritoneum left in a weak flaccid state

muscles — the bowels are often affected — — — — — —

Diagnosis — may be confounded with Enteritis — but it is not of moment to distinguish them — as the treatment is much the same

In Peritonitis there is no desire to go to stool nor is the pain relieved in the least by the most copious evacuations — —

Treatment — must be a matter of dispute — My practice is to carry the employment of lancet in the early stage as far as the strength of the patient will allow — with the attending circumstances — paying no regard to the pulse — which is depressed in proportion to the violence of the attack — I take at first 20. or 30. ℥ — & if no perceptible effect is produced — I repeat it — according to the emergency & I have taken in a day from 40. to 70. ℥.

V.S. is indispensable — but will not alone cure it — It will be proper to resort to local bleeding by Cups or Leeches to the abdomen — carefully applied so as to take 8 or 10 oz of blood & this must be repeated again & again — next induce sweating — which often acts like a charm — best to employ the external means to promote perspiration — the vapour bath — assisted by diaphoretics combined with opium — Dover's powder for instance — — —

Blisters of great service when timed — but not in the first stage & should be preceded by direct depletion — & warm fomentations to the abdomen — as warm bread & milk poultice the effects are great — not only for the ease of the patient — but they act on the disease & lessen its violence — the French object to blisters — but they are of great use when well timed

Dr Chapman thinks plunging would be of benefit in this case & will be largely in the commencement uses purgatives — castor oil / or & writers of great respectability are in favour of purges in this disease — I do not see why they should not be of as much service as in all other cases of Phlegmasia — enema or enemas of purgatives used largely as emollients / Diet Mucilaginous

1 3 ℥ Spectasp — having thus evacuated — omit them & use

The system is depressed not weak & take care of stimulants over bep

Peritonitis often attacks suddenly without warning — and very quick in fatal

cold to the abdomen recommended by some late writers but I think not from practice but theory

1 Calomel & opium recommended & used in the sinking stage but

Spectasp is much better & I cure it — enema & tympanites which often occurs

224 must depelope affection by wounds blows & hypothetics the first urge the lancet

Chronic Peritonitis.

This form of the disease is obscure & ill defined & more difficult to treat — stealing on gradually for weeks or as Heberden tells us for months — without exciting any ~~[illegible]~~ of suspicion of its dangerous tendency — There is slight soreness of the belly or pulsive tenesmus from one item to the other — the patient complains more of the pulse somewhat quicken — tongue furred in the morning & the pain — the abdominal muscles often loose but the & the face pale with an expression of languor & distress — & is a tense feel under them — in the advanced stage the

It after some time assumes the acute form & in the superficial vessels of the abdomen enlarge & become tortuous — as the previous exhaustion — forbids varicose & diarrhoea is liable to occur

depletion — must use the treatment as far as circumstances will admit — laid down in acute Peritonitis in the former page — | where symptoms of gangrene occur must exhibit Spts of turpentine in large dose a table spoonfull every two or three hours — — — — — — — — — — — — — —

+ occurrence of the first in the evening with increase of pyrexia & suppuration may occur without any pain | do of the pleura should the force water with care

Colic

A common, dangerous & distressing affection — cutting into requisition all the resources of our art — When violent — It has been defined — a painful distention of the lower part of the abdomen — attended with a twisting round the navel & spasmodic contraction of the abdominal muscles — It is divided into three kinds — the Flatulent — the Billious & the Flatulent

Colica Pictonum

Diagnosis — by the spasms & in the commencement easily from pleurisy — may be confounded with hernia strangulata — known by there is very often intussusception & it is very bad — but Prognosis has never seen a recovery when the patient had vomited for a week matter

Flatulent. Colic.

Known by the flatulence — by the causes producing it — as eating indigestible food — as cabbage, c/c — cold feet — constipation &c — — — — — —
Symptoms are sickness & vomiting — with spasmodic pains in the belly — the pulse is at first little affected when infla comes on the pulse is small hard & corded
Treatment — proper at first to evacuate the stomach — by giving warm water or warm camomile tea — largely or of coc — should the colic the irritability by cordials — carminatives & anodynes — as warm toddy — Ether — mint or other aromatic oils — & opium
when it arises from cold — must not premise vomiting — but must first apply warmth to the feet — the stomach & abdomen — by hot bricks — bottles of hot water — bags of warm salt — & by ashes or hot oats — when infla — opium must not be spared — the pain thus removed should give a purgative to complete the cure & obviate the tendency to relapse — — —
The only case of Iliac passion I ever saw was brought on — by eating cabbage — the patient died with stercoraceous vomiting — — — for intussusception — use opium largely & soothing & little else can be done
thinks the pain probably depends on distension of the bowels
the oil of mint 13 } is excellent — dose tea
spt turpentine 13 } spoonfull every 1/2 hour
assafoetida in water is very good 23 — to the O. —

Bilious. Colic.

Endemical at the south — & may be considered the common bilious fever turned in on the bowels — attacks at the same season that bilious fever is apt to occur — — — —
Symptoms — preceded by chills — attended with high arterial action & modigious accumulation of bile — violent pain at the navel & there is at times vomiting of stercoraceous matter depending on inverted peristaltic motion or intussusception
had known blindness to alternate with colic cured by drastic purges

Diagnosis – Dr Rush distinguished it from other colics by the chills – which usually when it is –

Treatment – being highly inflamatory – V.S. is indispensable – by V.S. I have seen it instantly arrested – or so mitigated as to give little trouble afterwards – to effect this the lancet must not be sparingly used – must take about 20 – 30 ounces at once – the next indication is to open the bowels – which are usually costive – must first tranquilize the stomach with lime water & milk – with a anodyne clyster – (this was always the practice of John Hunter) should give 12 drops of laud. in enema – the warm bath as an auxiliary is of great utility – – – – If failing must again resort to V.S. & copious injections – as a last of admirable resource – if it should not overcome constipation add 1.3 of jalap – – – –

It has been found useful to inject cold water in large quantity into the rectum

When failing – may use tobacco injection – not more than 1/2 3 in a pint of boiling water or may use the smoke – the best way says Earle – (as safest & best) is to use tobacco in enema – is a quick poison – this may at any time be taken away.

I have derived many times great benefit from enema of Tart. Emet. – 20 grs may be used at once – it induces great relaxation – was once called to see a child that had some food sticking in its throat – the case was urgent – I had no probang with me – I gave a Tart. Emet. enema & so great relaxation was induced that the offending matter passed without vomiting into the stomach

Mechanical distention of the lower bowels has succeeded in giving injections if we have not the Cate injecting instrument – should use a flexible catheter – the Oesophagus catheter the best – insert 4 or 10 inches – so as to act on the colic

in removing constipation — Vomiting allayed must give
mild purgatives by the mouth — I have known Sulphur & Mag-
nesia to operate after the most drastic had been tried in vain
castor oil & 10 to 15 of Spirits of turpentine works very quick — none
Epsom Salts are each very useful — round
the purgative I prefer in this case is a combination
of opium 2 gr — & Calomel ~~½~~ ½ to ½ gr — the stomach com-
every 2 or 4 hours
Blistering and cutaneous tonics 1/2 gr — forced
age cough to cover the whole abdomen is
indispensable

Mercurials must salivate — use the medicine
ext — & internally — acts as it would offer
by increasing the secretion from the bowels — we
may almost always effect cure from it as
soon as Sol — opens the bowels give way

Colica Pictonum —

One very common now rare — its name from Poitou in
France where it prevailed very much — in England called
Devonshire colic — put in the cider to procate it as it was
wine & France
Cause — once supposed to be induced by the use of lead alone — but has
of late years been found to be induced by other causes — such as the use of the acids — lemonade — vinegar
& cider — unripe fruit — indigestible (almost) as cabbage
exposure to cold — damp — sleeping — damp painted rooms
& bad bile &c — the general cause is lead
in some shape or other — hence most common where lead is most used as among printers & painters &c
Symptoms — caused by lead — a slow pain in the stomach
extending down to the intestines — with a twisting round
the navel — nausea & vomiting — thirst — anxiety — fre-
-quent tho' ineffectual desire to go to stool — pulse very
small quick & corded — differing thus from Bilious
Colic — this never rises — Some Sat produced it though he has known
2 of it to be taken at a dose — it purged with tormina & tenesmus
a dose

colic — which has a strong pulse after a short while the pain increases — the belly becomes tender — the abdominal muscles thrown into contortions & the intestines thrown into spasm so as in some degree to prevent the injection of enema a vomiting of dark foraceous bile takes place — in the more advanced stages the head is much distended — & now comes on nervous tremors & more or less of paralysis — depraved vision — — — — — —

Treatment nearly as in Bilious colic — First bleed — notwithstanding the state of the pulse — next purge & here a combination of opium & calomel as in Bilious colic — then fairly use the other means enumerated to overcome constipation — Castor oil has been almost consecrated to this case Not. Lines. 3 to 5 grs 2 or 3 times a day acts as a purgative & after a few days 6 grs 3 times a day & afterwards once a day

dashing cold water on the abdomen has been extolled as removing constipation or injecting it into the bowels

the best practice is with mercurials & opium as soon as salivation occurs. the bad symptoms are at an end & the paralysis so apt to follow avoided — — —

Blisters on the abdomen are of eminent service — but must be large Anodyne clysters are to be used

bad flannel & the flannel roller to be worn next the skin — —

Prognosis in the commencement easily cured but the sequelæ if not cured are very obstinate

Histed as lead is so corrected by mercury might not mercury correct the bad effects of lead?

Cholera attacks of the French settlers in India the death of a dog from a great number of it victims

Cholera. Morbus.

A disease general of warm weather & warm climate — It consists in copious discharges of bilious matter both upward & downwards of the contents of the stomach at first the with considerable griping — like Bilious colic it is a fever tinged in on the alimentary canal & is cured by much the same ~~treatment~~ sort of remedies — may now & then be traced to indigestible food — Besides the symptoms already mentioned — there are pressure pain & distension of the abdomen — with flatulency — the pulse weak becomes more weak as the disease advances — with tending to fainting — the respiration is hurried — tongue furred or a milky appearance the surface is pallid — cold & heart — attended with cramps or spasmodic contraction & great pain — becoming extremely harassing to the patient — there is little fever Cholera resembles many of the bowel affections — but is peculiar — & is to be treated accordingly — — —

Diagnosis — from colic by the absence of constipation — & from Dysentery & Diarrhoea by the discharge being of pure bile — — — — It is at first a gastric irritation — the stomach is the primary seat of the disease — — —

Causes — are exposure to cold — or some impression on the stomach as the influence of Marsh-Miasma &c —

The first vomiting are of the crudities of the stomach afterwards comes bile — & the Liver becomes affected

The bile is not so acrimonious — or in health the quantity is large — — Nitrous acid 13 comfortable emulsion of or — Tincture Opium 40 drops — table spoonful a dose every 15 or 20 minutes

 Treatment The indication is to remove the irritating substances from the stomach in the first place — however in some cases the administration of opium in the very commencement will put a stop to the disease & subdue the spasm & must use a powerful anodyne one the pills of opium pill may be retained on the stomach the practice (common) proper — to aid the vomiting by draughts of warm water &c This is the practice founded on prejudice — I see no reason for not giving an emetic at once instead of delugeing the stomach — My practice is to give at once 20. grs of Ipecac — after its operation by warm drinks & evacuates & an antispasmodic — then give calomel or castor oil to remove irritation & spasm V. L. is an admirable remedy — but must be not to be used with prudence In doubtful cases should precede the lancet by the warm bath — which itself is of great service alone — & where V. L. is forbidden must leech the abdomen Opium is of great service but given in the form of enema — repeated every 3 or 4 hours — Given by the mouth it should always be in a solid form & an old pill must apply warm fomentations to the stomach — as a bag of cloves wrung out of hot spirits — this is of permanent as well as present advantage — to allay the irritability of the stomach give Lime water & milk &c but must rely on opium — given by the rectum largely blisters are ~~large one~~ the stomach & should the patient to one or both of the extremities —

Cholera M. is sometimes very rapid I have known it end fatally in a few hours — this is not common must avoid all exciting causes — as heat — cold, cold feet — night & Chap thinks that in the commencement of nearly all diseases when there is much pain & a very small pulse it should be considered as an oppressed pulse & draw blood strongly

air excesses of any kind &c & was placed bowels & soluble tonic
of the stomach must be restored by the medicable tonics bitters — as Quassia or the glycerine Vitriol Columbo &c Stickwater good as an article of diet
or to allow the system time to react
would not fail but be of great service
calomel given in small doses allays the irritability
& is of eminent service

Cholera Infantum

endemic
almost peculiar to the U-States — little has been written on it —
Causes — It is nearly entirely confined to the cities
predisposition — but is added ingestion — debility — the
& the bad air of cities appears the general cause
exciting causes are indigestibles — diet — & clothing — the irritation of
dentition — worms &c children most liable to it between 12 & 18 months
has known at 2 months — even after 2 years
Dissections show that it effects its seat in the mucous
membrane of the alimentary canal — the peritoneum inflamed
not & distended by congestion
— and — Liver deranged — the gall-bladder filled with vitiated
bile — It seems closely allied to the acute affections of more
advanced life — the calibre of the viscera is sometimes
so much contracted by the thickening of the coats that a quill will
scarcely pass — Dr Chapman's practice is in urgent cases to
bleed & leech
bleed several times — & in mild cases purge with castor oil
& occasional leeches
but in more severe cases he prefers calomel & opium — the liver generally affected
Bd 1/2 gr Opium 1/4 gr every hour
will often be necessary to allay the stomach before giving the
medicine by fomentations — lime water & milk &c — when
by strong coffee without
nausea is great give opium — though prejudice is against
sugar or milk — by the bowl in lemonade very soon
& give in small quantities at a time
its use — my experience tracks me different —

I think in this as well as in the other bowel affections we are
purging too far — the purgatives are only intended to relieve the
irritation & not of themselves to irritate — — —

I next resort to those medicines that quiet the stomach & determine to the surface of the body — for this the following answers well
Opium 1.gr Calomel 3.gr Ipecac 3.gr — divide into 4 pills 1 every 3 or 4 hours — anodyne injections for the same purpose at the same time
To relax the skin & determine to the surface use the warm bath — this also equalizes the unequal temperature of this disease but it is necessary that it should be frequently repeated — may be indeed more effectual by adding to it salt — cayenne pepper or brandy &c repeat daily or twice a day — head kept apply cold
Blisters in every stage are useful to the stomach abdomen or the extremities — they must vesicate — in some cases where vesication does not take place there is no diaphoresis
Cholera continuing it is apt to run into diarrhoea — with tormina & tenesmus — for this use — Creta. ppt. 1.3. Tinc opii. 18. gtt. " ~~Sol Sat. 1.3~~ — Succ — alba 1.3 — ~~aroth — Sac alba~~ 1.3 — Aqua Cinnam 3.3 — Tinc opii 18 gtt — Aqua 3.3 — Again ℞ Rhei. 10.gr — Magn — Ustu 20.gr — Tinc Opii 18 gtts — Ol — Anisi 4.gtt Succ 1.3 — Again — Violate 10 gr — Ol Ricini 1.3 — Sach 1.3 — Tinc Opii 15 gtt — while stirring add aqua Calcis 5.3 — may add gum arabic
purple profuse diarrhoea must be treated as in common with astringents. Alum 2 or 3 grs with 1/4 gr of opium every 3 or 4 hours &c — the best is a strong infusion of the dew or blackberry of our country — The Sac Sat is excellent 1/2 to 1/4 oz 3 or 4 times a day
above all the remedies is a change to country air or even a
may add a little opium
ride a — or ride in a — carriage — the
must attend to the cloth of the child that it is warm &
the child should not be weaned within the year — the
in cholera it should have human milk or dilute cow milk — may use arrow root &c as nice
dentition should be attended to & the gums cut as this always
disposes to disease of the bowels &c — child should not have stimulants in the hot weather — it is common to prevent heat
+ when the bowels become weak give balsam or opes tanp — also anodyne injections
has seen diarrhoea stopt by a flannel roller on the whole of the abdomen

Dysentery or Dysenteria

Cullen defines this to be a contagious fever – in which the patient has mucous or bloody stools – with much griping & tenesmus – the feces for the most part being retained – Except the operation of its contagiousness this definition does not require amendment – The history is familiar – Symptoms are chills alternating with flushings – frequent pulse gripings soon follow – with propensity to go to stool – in some cases the local affection is the first symptom – In others the disease is preceded by loss of strength & appetite – constipation – nausea vomiting & the comes on irritation of the bowels – As the disease advances the evacuations become frequent & painful – tormina & tenesmus increased by flatulence – prolapsus ani often happens the alvine discharges are charged becoming pretty mucous or streaked with blood – in some cases there is hemorrhage of pure blood – coagulated lumps like pieces of steaks are found in the stools – sometimes pure blood – now & then psoghala pass – & invariably give the patient ease in addition to the above there is fever shewn by the heat & thirst – furred tongue & restlessness – the pulse not very full or active – however tense or corded it may be

This point may be considered the crisis – the disease sometimes ~~terminates~~ reaches it in a few days – but is often more protracted If not arrested it becomes very serious & alarming – the pain increases – there is great prostration of strength – the extremities become cold – the abdomen becomes tense – Petechia – Hiccough & aphtha make their appearance sloughings of the gut sometimes takes place

L4 with feeble pulse - the alvine discharges resemble the washings of meat - these symptoms are generally the precursors of death - but not inevitably - for I have known recoveries from them all - a gradual subsidence is favourable & vice versa

Causes - Not from contagion unless attended by fever of a Typhus or congestive character - the poisons do not produce it it is the result from the extreme vessels in a Typhus state the most common causes are the ordinary powers of our autumnal fevers as miasm - sudden changes of weather - acid food - not unfrequently occurs as an epidemic - may be caused by a check to perspiration - sometimes accompanies catarrh & has been known to alternate with rheumatism - Crude fruit - Solid food or poisons - sudden changes from salt to fresh meat & vice versa & ditto animal & vegetable food Sydenham calls dysentery - febris hysterica - & it undoubtedly is & it assumes the intermittent, remittent or continued form the last may be either inflamatory or Typhus - This disease usually ~~always at~~ commences in the stomach - afterwards affecting the bowels & effacing itself on the large intestines

Dissections show these parts inflamed & otherwise diseased

The indications are to reduce inflamation - remove irritation & spasm - to open the bowels & restore the secretions of the liver & perspiration

Emetics only in Miasmatic districts & where the stomach is overloaded - as the disease usually presents My practice is as follows - V.S. ~~to~~ the usual quantity of no use indispensable - can't take 2 lb. or 30 z. it is a admirable remedy - & aports all the after endeavours & is of itself of immense utility & removes the spasmodic constriction - with the removal of which alone we are enabled to operate - giving proper calomel either alone or with Ipecacuanha the bowels ~~it begins its~~ does not operate - follow it up with some V.S. must be used quickly or not at all as no reprieve is left tenacious of life than the mucous tissue of the bowels & we can scarcely bleed safely after the first 24 hours

laxative or an enema — & for this purpose are the oil castor & Epsom salts — & it is sound practice to purge until ~~sound~~ natural evacuations are produced — while the acid fecces remain they will cause irritation & inflamatio — when we purge with oil — the doses given are too small

I recommend early to opium — notwithstanding the authority to the contrary — & join it with some diaphoretic or some mild soothing evacuant — — — the febrile action as shown by the pulse must have been reduced by direct depletion before the use of diaphoretics

In the early stage there is no substitute for the lancet — I know a physician of this city who says he can cure the disease by two remedies alone — V.S. & opium — I cannot go quite so far — but believe very much may be done with them

Sweating in the early stage is injurious — & fatal very often — except it is a kind of catarrh which does sometimes happen & will mark your ways with by the mortality induced — — — Akeside & Richter both condemned the practice — but beware of it — — Broussais views are similar so far as to avoid purges — but these will not answer

to sweat in Dysentery I employ & prepare the following Opium 4. grs — Calomel 16. grs — Ipecac 8. grs — divide into 8 doses — one every 2 or 3 hours — this is the best preparation as long as there is wished for any discharge — but for more copious sweating may use Dowers Powder — — —

Ipecac alone or combined has been highly extolled in this disease & it has been given in all stages in large doses — 30 grs — but it is I am of opinion only in the early stage — ~~that~~ that very large doses can be given with advantage

this is to be combined with laudanum 40 gtts this repeated repeat the dose when it generally retained, the patient must be kept in the recumbent posture

236 Antimonials should circumstances require — they are not in general as good as Ipecac — Sir George Baker & Sir Jno Pringle to the contrary — You will find Ipecac generally meet your views in the treatment of this disease

— Fomentations — to the stomach & bowels — relieve Phlog & spasm & promote perspiration — never to be neglected —

Liniments have been employed — for the most part of Laudanum but of late the Ess Turpentine has been much employed — & is undoubtedly of service — — especially where there has been much pain & distention of the abdomen — Cloths wrung out of it are laid to the abdomen — to answer the same purpose they — relieve spasmodic uneasiness & promote diaphoresis — we may use the warm bath in adults — but is much more convenient in children & here should always be resorted to if we determine to sweat thoroughly — use the vapor bath

A flannel roller carried up from the hips to the armpits is said to be of great utility in all the severe symptoms attending the case & have not used it in acute dysentery is of evident utility — I have been in the habit of using it in Chronic Dysentery — Diarrhea & in Cholera Infantum

After purging & one or two copious bleedings — I cover the whole abdomen with a blister — the inconvenience of a raw abdomen in this disease is far overrated — If you are not falsely tender & employ the remedy you will have reason to be delighted with its effects — — —

+ The painful affections I allude to Tormina & Tenesmus require particular attention for Tormina — the following formula is well calculated — when there is at the same time foul accumulations in the intestines — to remove this the oleaginous mixture

℞ — Rhicini 1.3 — Gum Arabic 1.3 Ol alba .1.5 — Tinc Opii from 50 to 60 gtts Aqua Mentha or Cinnamon 2 ℥ — give a table spoonfull every 3 or 4 hours Sacch Saturn & Ipecac are of eminent service — has found a solution of a spoonfull of salt in 4 or 5 of water sometimes act like liked charm

castor oil - with mucilage & lime water also the Cretaceous Julep
are of service — I have done good with Opium & 1gr of opium
a simple opium clyster has relieved both Tormina & tenesmus
still better is 3 or 4 grs of opium introduced in inst. up the rec-
-tum & lodged there — — But of all the remedies for the
painful affections the best is melted fresh butter — ½ or 1 pint
thrown up several times a day — the animal are less irrita-
-ting than the vegetable oils — Opium as an enema
Mercury to induce salivation is ~~extremely~~ relied on in the E. Pro-
-dies & must employed — the disease ~~the~~ that climate is
usually accompanied with hepatic disorder — & the treatment
undoubtedly the best — but in open inflamatory dysentery it
would not answer — the process is to slow & death would
ensue before stupor — but in the chronic form or when
it assumes the Typhus character — Mercury has a most happy effect
the diet should be such as to require not much digestion
& should be in a fluid form — Demulcent drinks have long
been used — as Barly water Rice water — decoction of the
bark of the slippery elm — Gum Arabic water — sage —
arrow root — & tapioca — Demulents are only age use as affor-
-ding nourishment — that they defend the bowels from the acid
matter is a relic of the old Humoral Pathology — — —
In the Typhus form as it occurs in particular states of
the atmosphere in Ships — Hospitals & Jails — here for-
-ne the same course as — the low stage of disease —
& warm bath — leeches if
& Emetics must be used in the early stage — next moderate evac-
-uations from the alimentary canal — & we may then
with the Typhus form or in the common form
when the patient begins to sink

rest to the cordial stimulants — opium — Vol. Alk — wine — why, & Bleeding — but the proper practice is a recurrence to Mercury — used externally & internally — so as to produce Ptyalism the system at the same time supported by the diffusable stimulants Nitric acid has been used in this state — with evident advantage — in the low form may give Beef tea &c

Dysentery — attended with an intermittent fever — requires the usual treatment — bark is not admissible — but is given in decoction & infusion — Sydenham & Cleghorn to the contrary — it is extremely offensive to irritated & inflamed bowels — as in the case here — — My plan is to disregard the intermittent fever until the affection of the bowels is cured — Charcoal has been highly extolled in these cases — it corrects the acrimony & fector of the discharges & in the complication of the two diseases we are told its good effects are more fairly manifest — — It is used — caspice Jeffe

Chronic Dysentery

To a certain extent different from the acute — here there remains a degree of soreness & tenderness of the bowels — they are excited by the slightest causes — the evacuations are small — fœtid & attended with painful griping — no appetite — digestion imperfect — purpose of the body dry & parched — eyes sunk — skin pallow — great determination to the internal parts — I have met with several of these cases — which after resisting the usual treatment of tonics & astringents get well rapidly under a course

of dover's powder's - with other medicines that act by keeping up a determination to the surface - The flannel roller must be used It is sometimes kept up by Hepatic derangement - here we must have recourse to calomel - & produce ptyalism - Nitric acid has been of advantage - - - - - - - - -

Diarrhoea

This is closely connected & readily confounded with the last disease - Nosologists tell us that Diarrhoea is to be distinguished from Dysentery - by never being contagious - not with much fever - evacuations not mucous or bloody yet not natural - nor the tormina & tenesmus so violent - but they run into each other - so that between a mild case of Dysentery & ~~not a~~ violent one of Diarrhoea ~~the~~ is very difficult to draw a line of distinction

Diarrhoea may be defined a morbid increase of the peristaltic motion of the intestines - which state may be produced by a variety of causes We may divide the disease into Idiopathic & Symptomatic of the first of these I shall now treat - which is divided into acute & chronic causes - these may act directly or indirectly - the first are indigestion - the deposition of a superior quantity or deleterious quality - the second are exposures to cold - may be considered a catarrhal affection violent fits of anger - fatigue &c.

Treatment - the indications are to remove the cause & allay irritation - for the first if there is any thing in the stomach rejection - give a cathartic & after at a dose of castor oil - if there is fever - if there is fever - J.S. is not to be omitted - & the mild diaphoretics with opium - as the base are to be administered - - - - - -

240 When the disease is caused by checked perspiration — the warm bath is proper — & after it Ipecac alone or with Spes Mindereri In most cases the cure is easy — but the chronic form is embarrassing & it is often connected with deranged viscera — the pancreas, liver & stomach — & often aggravated by pressure — here should the pulse be tense & chorded — V.L.D. —

Dissections show the viscera in a state of inflammation which when chronic is difficult to remove from its seat — should not be discouraged should the first bleeding not answer — but it is not so easy to remove chronic as acute inflammation — must repeat according to the state of the system taking a little at a time I have been obliged to bleed 20 or 30 times before the disease was arrested — taking not more than 6 or 8 oz at each time — gentle Emetics of Ipecac should be given 2 or 3 times each week — Phlog being somewhat removed by V.S. &c — not only as evacuants but that they may alter the morbid action — I have found the following combination useful to restore the functions of the skin &c — R + Rhei 3 1/2 gr. Ipecac 1/2 gr Calomel 1/2 gr Opium 1/2 gr — mix — divide into 10 doses 1 every 2 or 3 hours during the day — Powders of soda at night 10 grs with warm drink — antimonials prescribed by some

A warm bath is here of service — made stimulating by the addition of Mustard & spirits — & the flesh brush used after going to bed — + Kept the internal use of alum is of great value in this state of the disease — It is a tonic & may like Rhubarb be given so as to prove laxative — I give from 3 to 5 grs with 1/2 gr Opium 3 or 4 times in the 24 hours if the skin is dry & the bowels griped add Ipecac — Moseley's Vitriolic solution is very highly recommended in chronic diarrhoea — I tried it once & with success — Dr Barton was enthusiastic in its praise — the objection to it is that it so nauseates the stomach that very few are able to take it & retain it

+ alum is also used by some

Blisters to the ankles & wrists alternately are universally recommended & act as revulsants

Where debility of the chronic form arises after the acute or inflamatory it is often kept up from mere debility or it may be the case in old age or symptomatic of fevers — here the indication is to restore the tone of the stomach — for this we employ tonics & astringents & among the best are galls ℞ + — galls 4.ʒ — Creta ppt 3.ʒ — Tinct opii — 1.ʒ — a table spoonfull every 2 or 3 hours — or the following ℞ + Tinct Kino 3.ʒ — Creta ppt 3.ʒ — Tinct opium 1.ʒ — Aqua 4.ʒ — take as the former — boiled flour — is used — — the best astringent in this state of things is the decoction of the Dewberry root — a wine glass full every hour or two — this is well suited to the diarrhoea of old people — The Sac Salt — is sometimes very useful — especially where there is tympanitis & tenesmus — the mineral acids are of service the vegetable improperly against the disease — the Nitric acid & pepsin dose 10 to 15 gtts 3 or 4 times a day with laudanum gradually increased to double the quantity the Nitro Muriatic bath is excellent

Nitric tea is good — made by pouring boiling water on the bruised fruit — a desert spoonful of vinegar — will sometime palliate when other means fail

Diet should be light & easy of digestion & should give tonics of the various preparations of Iron &c — — —

The body should be rolled in flannel — 3 or 4 layers should be worn

Where there is obstruction of the chylopoetic viscera or other derangements — must resort to Mercury — & may use the blue pill regular exercise should be taken & is better when taken on horseback as a last resort should advise a sea voyage to the south — this has been known to effect cures — — —

Symptomatic diarrhoea ought not to be widely checked as it is often critical as in Fevers — Gout — Dentition &c — — —

where ulceration occurs use Spt turpentine & the balsams

242 Hodge Serving the wort of rhubarb is good when there is not even constipation

Constipation with headache &c

This disease consists in a preternatural retention of the excrementa which become hard & dry & their evacuation is difficult & painful — It times is a relative one — as some have stools daily this generally happens — but others have them at intervals of weeks months or even years — without much if any inconvenience Hallé mentions several cases to this effect some of 30 years standing — Dr Hunt used to relate the case of a sea captain who took eloping the attic to London from Phil — never had a passage from his bowels — yet his health unaffected — but this is generally injurious to health producing febrile symptoms — obstruction of the circulation Headache — Vertigo — Nausea — Fœtid breath — Fœtid excretion & piles & many other disagreeable consequences lays the foundation for the most formidable diseases — & the mind shares in the disease

Causes Torpor of the intestines — a deficiency or vitiation of the bile — indications when from torpor must be the proper discharge of the functions the bowels must be susceptible to stimuli & the bile in a state fit to stimulate use drastic purges — & after the operation keep the bowels open by laxatives or pills combined with Magnesia — calomel

When owing to deficiency or vitiation of bile — must use the mercurials — & if we do not succeed must go on to salivation Horsch uses Yellow Emetic

The inspissated bile (at a moderate heat over a sand bath) by a of madiate pills is a good laxative dose 10 to 15 grs has not failed him

Nocoal has been much praised in doses of a table spoonfull — it acts pretty actively & consults the patient of the digestages & that of the breath — in constipation of the large intestines must keep out the rectum with Moon handle the use clean diet — Tapioca — Arrow Root — Tho lapis — & c with Remote causes — Phlegmatic temp — or those who have the other excretions very copious — as perspiration in summer urine in winter — also a neglect of going regular & to stool

the use of aperient vegetables - as the use of fruits &c.
a daily effort & that at a stated period should be made
this has been known to overcome the disease when med-
icine had failed - - - cold ablution should for
some time be employed in the morning - &c - - -

alkaline ext of jalap 15 } make into 20 pills - 1 or 2 every night
oil of caraway - 20 gtts } - one pint of weak senna tea
filled up with prunes add 1 tb
of sugar - simmer to a syrup
in a gentle laxative
+ often succeeds where other
remedies - difficult & bad digestion

DYSPEPSIA

Mimosis has been applied to this disease it imitation but
conveys not precise meaning - but that the disease has
to the refinements of society we are chiefly indebted for this disease
various morbid symptoms
which is very common & extremely difficult to cure - It appears
with a sense of oppression at the pit of the stomach Nausea - & Vo-
-miting - irregular appetite - sour eructations - Cardialgia
griping pains at the stomach - (especially when empty) Pyrosis
constipation of the bowels - great depression of spirits & disturbed sleep
sometimes there is almost diarrhoea or the
then the are the ordinary symptoms - but some highly em-
stools are light or very black
-barrassing appear occasionally - as a pain in the breast - side or head
or the vision is disordered - extraordinary diseases of the eyes &
sometimes double vision - I have met with it perverted &
& also blindness - I have seen a case where spasms of the stomach
attended with blindness - also there is Vertigo - palpitations &
tinnitus aurium - violent palpitations of
tenderness of the scalp - in this disease the powers of digestion
the heart - has seen every form of retardness
one not always weakened - they are sometimes preternaturally vigo-
accu
-rous - the appetite is very much depraved - at times
causes - from excess in eating or drinking - or the reverse
-ers - as strong tea coffee ardent spirits or acids - too gross food
the disease at times extends to the mind & produces
Hypochondriasis

247.

too frequent taking of medicine — particularly emetics — tobacco next to intemperance is the most prolific source of dyspepsia — tobacco Opium — or of the same pep — particularly Nitra & hypochondriasm — treat — discontinue the use of the article which I have never seen used for any length of time without producing Dyspepsia injury to the digestive organs — by intense mental application — sedentary occupations — grief — or vexation of mind — by cold more particularly habitual coldness of the feet by which perspiration is suppressed

Dyspepsia is sometimes symptomatic of diseased Liver — Spleen — Uterus — Pancreas — Brain — Spinal marrow — which is very unfavorable — or from constipation or other irritation of the bowels has been taken from carious teeth — treat — remove the teeth — treat — first indication — Cleanse the stomach — so as to remove crudities & prepare the way for the employment of our remedies — for this are special — & by no means to repeat never to use emetics when we suspect Phlogosis

next the anti purgatives — all the saline & drastic to be avoided — except Rhubarb — which is approved & excellent remedy — it leaves behind it a tendency to costiveness — obviate this by combining it with soap — or calcined Magnesia — add a little oil of caraway

The laxative & purgative is when there is some vegetable equal parts of Sulphur & Magnesia or Magnesia alone or Cretaceous ppt — they act on the bowels — but action by their absorbent & astringent powers.

Must now resort to tonics & of these the red & pale bitters are good — & quassia & the Hops the best — Hops used in tincture & infusion — — to cases of old drunkards the following is good ℞ Rhei ℥ii — Canow seed ℥i — add a quart of brandy — rubbed together in a mortar — tablespoonfull 4 times a day — pills of these articles called peristaltic pressure are excellent in all cases where we purge

The mineral tonics are more serviceable & the carbonates — as in chronic gastritis in the first stage — not seldom found any Phlog.

~~these pills~~

note of iron ranks very high — the dose of 10 grs with a little ginger — a neater mode of prescribing the Chalybeate wine the ~~but~~ of the Dispensatories is as follows ℞ + Rubigo Ferri 1.3 — Gentian — ℥ss ℥ss orange Peel — ℥ss ℥ss Port wine 1.℔ — put in a warm place 3 or 4 days —

I prefer to the other Chalybeates — the Sal Martis — as follows ℞ + Sal Martis 1.3 — Gum Arabic 2.ʒ — pills 30 — give several times a day — Tinct. Muriat. Ferri — is much used — I do not think well of it — dose 20. gtts 2 or 3 times a day

Certain affection at times occur — as Cardialgia — a pain in the stomach from acidity — the acid eructation — use of muriatic or lactic acids — we cannot always repeat the emetic — but must correct the acidity — by the alkalies & absorbents — as Lime water — with milk is excellent —

an excellent prescription is ℞ + Sal Tart. 2.ʒ — Tinct Lav. Comp. 2ʒ. Tinct Opii. 30 gtts — Sacc Alba 1.3 — Aqua 1.3 — a table spoonful every 6 hours.

the Dol. Alk. good — with the Carb or aqua ammonia may be given not where there muriatic acid — as it forms the muriate of ammonia

be popular & very excellent remedy remedy is ℞ Hickory ashes 1.qrt — port — a tablespoonful — add 1 gallon of boiling water — after a short while — decant — a wineglassful — or 1 or 2 — taken an hour or 1 & ½ after each meal — why this should be more efficacious than the pure or purified alkali I cannot say — I have derived much advantage from it

the Nitrate of Bismuth much confided in — ~~Nitrate of Bismuth~~ the evidence in its favour is great — In my practice it has not proved an important remedy — ~~or that of the Phila Physicians~~

I can recommend to you strongly the Aqua picra — viz — capella alba + aloes — of the Tinct — 1.3 or more at a dose against return of spasm for Gastrodynia — spasms of the stomach — use antispasmodics — &c — warm milk when the spasms are apt to occur apply a blister to the precordium cordis — drinking about a pint of tepid water will often overcome the spasm or boiling hot water — ineffectual — D.S. must be used

Pyrosis or water brash

This affection is met with more particularly in Poland Lapland – Norway – the Highlands of Scotland & in the Western States called in Scotland the water-brash – In England – black-water known by a burning pain in the stomach – with copious eructations generally of a watery insipid fluid

Its causes are very analogous to those of Dyspepsia & also the treatment is worse – pregnant given Spec Tegebinthy 8 or 10 gtts occasionally – this is the best remedy for it generally consists of diseases of the pancreas – but sometimes of the stomach alone –

Treatment – Emetics are best remedies but V.S. is not entirely to be withheld when the disease assumes a chronic form after infla – in subdued may use nitrate of potash & water

The bowels must be kept soluble by the saline substances

In disease & Dyspepsia will although there is no visceral derangement become rooted in the system so that it will be almost impossible to remove them ---

In this state of things, mercury slowly introduced will be the best remedy – prescribe of the blue pill 5 grs at night – small quantities laxative next morning

In cases of Drunkards Special care so as not to nauseate will be found of use & in all chronic cases is excellent – where the organization of the stomach appears attended with opium – &c

In cases of Drunkards – the cure depends entirely on the reformation.

Diet – the best is milk & here I mean milk alone & not even bread is to be allowed --- milk best when mixed opium is most praised by Cullen – Clay It is a fallacious – must be resorted to in Morsen

milk is possessed of extraordinary powers in spasmodic affections of the stomach — more than once have I known it to relieve violent spasms of the stomach from rheumatic gout — Col Williams was only relieved by copious draughts of new milk — the same effect was experienced by the late Mr Dallas Col Williams was ultimately cured by the long continued use of milk

The milk here & in Dyspepsia may disagree at first — but says Dr Cadogan in his treatise on gout (& I wholly agree) that when the milk on the two first trials disagrees it is a certain sign — that the further use is urgently demanded ——

In case the patient from Idiosyncrasy or other causes cannot take milk — we must resort to chocolate — unless common it is offensive to the stomach — but boil & allow it to cool — then skim off the oil that collects on the surface — reboil — & pour it on sugar & milk — it is then a salutary & useful beverage should not the ague may one weak black tea — no green tea or coffee is to be allowed but from circumstances could neither of them be taken or bohea tea the patient must use the lightest boiled food — as veal — mutton — white flesh of poultry & game with oysters — Kolfish oil — game — large ducks nor fish — nor salted or smoked meats unless very seldom & then in the case of drunkards

on vegetables one potatoes & rice — both well boiled with very little water so as to be mealy — brown bread & little chick at meals or the times — water the best — for habit brandy & water may be necessary the wind — but no toast as it so soon sours

should be careful not to disgust the patient with the quantity of food — nor with its odour —

The is of real practical importance

Exercise is of the greatest utility & the best mode is on horseback or otherwise in walking — & should be regular

The symptomatic is always more severe than the idiopathic & the palpitations of the heart is greater tho can well be imagined — in organic affections the palpitations are always weak

The Chalybeate waters as tonics are good such are the waters of Ballston & Saratoga New York for ever

The patient should wear the whole year flannel next the skin

I have seen Dyspepsia &c cure from habitual cold feet --- & this is not unfrequently the case -- for this ~~bath~~ is a stimulating pediluvium not a pervasive - or warm red pepper sprinkled on the soles of the stocking. Shoemakers wax spread on linen or leather I have seen applied to the soles of the feet & warm - cure this disease & dyspepsia & the affections of the lead so often an attendant - has been pepper worn in the shoes. Since the disease arises from the manner of life it must be changed - cure & confirmed care of gutta serena depends on diende of the stomach

In the greatest urgency there is hope of a cure with this or any other disease surrender up your patient to despair --- chronic gastritis may follow hypochondria referred to that disease for an account of it --- at times it will simulate tubercular Phthisis - should treat for the original complaint has seen worms simulate Phthisis - & the patient at the point of death - but appropriate

DROPSY

means afford relief!

Defined a preternatural collection of fluid - serous or more viscid ~~watery~~ in the cellular membrane or the various cavities of the body

as occurring in the different cavities it has received different names I shall call your attention to the three principle forms - Viz. Anasarca - Ascites & Hydrothorax

Concerning the Pathology of Dropsy there has been much dispute --- all agree that there is a disturbance of the natural & proper balance between exhalation & absorption

I has seen substances as buttons - nutmegs - nut shells &c in the stomach produce a sympathetic affection of the ~~stomach~~ lungs - full stomach at bedtime often causes croup - evacuate & all is well

hence as there is a fluid constantly secreted into all the cavities of the body & the same absorbed by the lymphatics — it is said that Dropsy may take place by preternatural effusion or too rapid absorption — I am of opinion that Dropsy of all kinds arises from preternatural effusions — — secreting vessels but the absorbents have an agency in the fluid — as a specimen represents one disease & general dropsy — it is of importance to determine whether it is of high or low action — the effusion is of a peculiar nature

Europeans noted that it always arises from debility & is usually connected with a cachectic state of the system — hence they resort to powerful tonics & the Fatality of their treatment shews its incorrectness — — We have gone too far on the other side of the question & the truth here as in most cases lies between the middle — Dropsy always arises from the cellular or serous tissues

Dropsy is connected with very different states of the system & demands for its cure different remedies

every practitioner must have seen it with fever & fulness of pulse — so described by Stahl in his chapter on Hæmorrhage — also many the Germans — It frequently originates from febrile action — exhaustion of the system or affection or rather obstruction of some of the principle viscera as the Liver — Spleen Stomach or Pancreas in proportion to the disease & superficiality of the effusion

The Pathology is however very obscure & to this may be owing the ill success in the treatment as the different states are compounded Lowe's effervescents have nothing as they were productive of great irritation congestion will produce irritation this effusion

Causes — all that tends to debilitate Intermittent Fever Jaundice — Diarrhœa — Gout — Phthisis Pulmonalis & the Exanthemata — also by congestions of the viscera & other derangements of the viscera — sometimes it arises from mere debility or relaxation & shews what is called the Digestive Diathesis & here I suspect the absorbents are in fault — — with previous morbid change by which it is produced — hence the cause is a morbid alteration of the action of the blood vessels & the effusion is the effect

Anasarca

when general when local oedema

or Dropsy of the cellular tissue much of what I shall say of this - will apply to ascites - but Hydrothorax is somewhat of a sec-ondary character & must to a certain extent be managed differently

Anasarca comes on with swelling of the feet & ankles towards night disappearing again in the morning - the swelling is soft & inelastic pits easily on pressure by the finger & the depressed skin becomes very pale - this gradually ascends until it covers the whole body - & an effusion takes place in the cellular texture of the lungs causing difficulty of respiration or effusion takes place in all the cavities of the body - forming what is called Universal Dropsy - with these symptoms there is obstinate costiveness - the urine scanty & high coloured - skin hot & dry - the pulse small - corded & febrile & great thirst - as it advances there is great stupor & heaviness - low fever - the distention becomes so great - as in some places to force its way through the pores - in others forming vesicles - which burst & gangrene & mortification en-sue & the patient sinks

Like all forms of this disease - Anasarca may be connected with to high excitement or debility - in both there are two indica-tions to be fulfilled - First to evacuate the fluid - Second - Second to change the state of the system favourable to further effusion - First of anasarca of high action the circulation & absorption are in inverse ratio - - here the indication is to deplete - V.S. is indispensable - but must be used with discretion - & regard to the circumstances of the case

where there is evidently febrile action which when present is very manifest & the constitution vigorous — should bleed copious while it lasts — several times in a week — I have known from 200 to 300 oz of blood drawn during the case with great success topical V.S. followed by ejectants

where V.S. is inadmissable — must employ all the evacuants Emetics are of advantage & were once much used — but have lost credit — Purgatives act beneficially by overcoming the attending constipation — evacuating the bowels & exciting absorption — Sydenham & his followers purged every day unless prohibited by prostration taking place — this I believe good practice — formerly the Drastic purges were much relied in they are only to be used where there is torpor of the bowels — no fever — no visceral obstructions in the old & protracted cases they are advantageous — — In the case before us (febrile) we are to use the saline Neutral salts — particularly the Tartrates — For the purpose the following is excellent — Cremor Tart — 1 or 2.3 — Jalap 10 or 15 grs — to be repeated every 3 or 4 hours so as to keep up a unremitted discharge if necessary — this give daily or every other day — I have seen in a few days the distention entirely removed by this alone — I press this upon you with great confidence gentlemen — in the Dropsy but it will not always succeed we must have recourse to diuretics the best is Cremor Tartar — the experiments of Home & Ferriar are in favour of its superiority over digitalis

capto oil will sometimes succeed

the Moderns much prefer it

Cremor tartar & digitalis are not suited to the same cases — cove the fat with oil with as in tinea capitis so here it will at times alone cure the complaint

 Cremor tartar combined with a large quantity of water acts as a diuretic – when given in the form of an electuary or with a small portion of fluid it is a hydragogue causes large evacuations of flocculent matter as well as water from the intestines – the latter mode I prefer – Dr Physick prefers the soluble tartar thinks there is little difference from the chemical composition – Much has been said of the hydragogue powers of certain alkalies & Potash is always preferred – formerly lye was used the carbonate of Potash found ready prepared in the shops has superseded the lye in regular practice this is merely useful in cases of old drunkards – with a acid in the stomach – Cullen supposed that they owed their efficacy by combining with the acid & thus forming a neutral salt – this I do not believe we improve the Potash by the addition of tonic bitters as this removes gastric disorder & is said to restore the powers of digestion – ~~dose 20 to 30 grs dissolved in water 3 or 4 times in 24 hours~~ – I can not say much in the favour of the acetate of Potass – The Nitrate is well adapted to dropsies of high action & best given in the form of Nitrous or Antimonial Powder a far less offensive substitute for the last is the Spes Nitri Dulc – is much inferior in strength – therefore given in large doses from 2 to 4.3 should be given several times a day – to have any effect in any disease it must be largely given – & if the repetitions are not increased must discontinue after some time or it will be injurious & increase the fever – The following is a good mixture – ℞ Laudanum 30. gtts – Spes Nitri Dulc – 2.3 – Antimonial Wine – 10. gtts – from this mixture I have derived the greatest good – a strong infusion of the parsley root I have known to cure a dropsy when tapping had been twice given – the objection to it is that it is apt to excite nausea & should be given very dilute which proves that or a gill of water may be to be worth more care than 13 in powder & dilute acts better.

-formed - it is an agreeable diuretic & does not offend the stomach
Chimaphila Umbellata — or winter green — has been introduced into practice lately, an infusion of the entire plant a pint in 24 hours or the extract 23 at a time — I have known this to cure several cases — it is a tonic to the stomach —
Ascites often proves obstinate — where we have sufficiently reduced & there is no peritoneal phlog we must rouse the bowels from their torpor — by the mercurials — with some drastics as Gamboge with Jalap rhubarb & Elaterium now much used — also the croton oil & to be of use in these old cases must be continued for some time must also use the diuretics & principally Digitalis this acts best in a phlegmatic habit when the system is reduced & exhausted by intemperance &c — It is mischievous when there is increased arterial action or much general strength or vigour of constitution remaining — these are no new observations — they were made long ago by Withering & experience has confirmed them — Withering & many other prefer the watery solution — I have found the powder & tincture answer every purpose — tobacco highly recommended by Dr Fowler & it is incapable in the system — Johnson & Fowler's squills are a service — very excellent formula gives an excellent form of dropsy — but we should remember they are strictly stimulant — should be given with calomel opium may be added to prevent them running off by the bowels — a slight nausea is all that is necessary & indeed this is not always necessary that they may show their good effects & prove high diuretic
We meet with dropsies in depraved & cachectic habits

Gamboge ½ grs
elaterium 1/2 grs
Nightshade ½ oz
water 4 oz
} dose tablespoon every 2 hours will be found of great service & generally succeed & in the hands of a known Dr

here the stimulating diuretics are called for ——

Cantharides it seems strange to give this medicine to produce strangury & at another to produce a diuretic effect at a time this is owing to the state of the system as it is only in a low state that it has diuretic effects — in this present case the dose is 1-3 or more of the tincture 2 or 4 times in the 24 hours Spes terpentine has been used I do not know that it is of any great use — Seneka phaseo root is an admirable remedy for this species (Viz Atonic Dropsy) of the disease It has been used in all forms of the disease with advantage — It has lost ground in the U.S. I am of opinion from its too general use in the disease — it is best suited to the cachectic & depraved state of the system & where the Dropsy depends on debility of the absorbents — or the feeble action — —

It is a very general stimulant operates on all the secretory & excretory organs & its efficacy is increased by adding it to calomel 10 to 20 grs of Seneka powder mixed with 1 gr of Calomel

In the same states of the system Colchicum autumnale in old atonic dropsy is much confided in by the French & Germans — I am not able to say any thing of it as I have not seen it used — the effect is the least harsh says Baron Stoerck of it dose 1-3 several times a day the saturated tincture dose 40 a 50 drops several times a day — — — —

Different articles of the class Alliacia — mineral & vegetable bitters as tonics not as diuretics have been employed — Garlic the most powerful & acts pretty strongly on the urinary organs is a favourite medicine in the London Hospitals — In dropsy from Drunkenness have derived evident advantage from it — Sweating as it has a tending to take off the determination from the kidneys does not seem to promise much — nevertheless it has been adopted in scrofulous cases or to vitiated conditions of the system Volatile tincture of Guiacum & Sarsaparilla the compound tincture

of great advantage — Diaphoretics are suited to those cases which are connected & arise from Intermittent fever & are kept up by visceral congestions & a depraved state of the system — here we find a small corded pulse — cold extremities & other circumstances — denoting a feeble circulation in the external capillaries I have more than once I am convinced met with Dropsy caused by the deportion of the matter of perspiration & here sweating is of utility — external means are the vapour bath &c — this will often answer alone — What would be the effect of confining the patient to a room heated to about 120°. F. I do not know — In the experiments made by Fordyce &c one of the experimenters lost in 10 minutes exposure to this heat — 1½ pounds of perspiration ....

For internal means of sweating use the combinations of opium — Calomel — & Ipecac — this is much trusted to — Opium alone has effected cures in very large doses but should be given largely — I have seen the doses I write of great utility. —

has run Sp. Dulc Nitre & antimonial powder of immense advan-
Eupatorium — Dr Horack says he has found it serviceable
tage acts as a diaphoretic
in the New York Hospitals — but adopted to cases arising in ague & fever countries having the intermittent type ...

It is a tonic & diaphoretic — & hence in Mis Jour good &c
in union with squills or digitalis — the powder of sen
Mercury — where there is visceral obstructions or
the root acts opp. to our satisfaction
where abdomen is deficient will be found necessary &
is to be introduced slowly — & use friction also should this not
but must better suited in general to ascites —
succeed the Nitro Muriatic acid bath — not to be used in depra-
to relieve the distention make small punctures but
-ved habits
not deep for fear of erysipelatous inflamation or gan-
-grene which is here very apt to occur & is very obstinate
If sweating by the vapour bath should continue it for 4 or 10 ho-
ur — & repeat daily — I think this of more advantage than gene-
-rally supposed — it diverts the action to the skin & wo

Blisters are to be used with great care for the reason just given — should not be applied when there is great febrile action or when the action is very low — but in a moderate degree of action — may be applied with advantage flannel rollers tightly applied above & below the gangrenous part are of great utility & should not be neglected — by the pressure vigour is restored to the lymphatics & they are excited to action — — — —

Tones it heights function in all diseases of great movement however has seen a blister relieve gangrene from anasarca when other means had failed

In universal dropsy the cellular & serous tissues are both affected

Ascites

a dropsy of the serous membrane for treatment see anasarca

A collection of water in the cavity of the abdomen — usually within the sack of the peritoneum but sometimes between the sack & external muscles, caused by acute peritonitis the effusion may occur in a few days — but generally occurs slowly

Ascites is preceded by loss of appetite — sluggishness & inactivity — dryness of the skin — pale face — oppression of the chest — cough — diminished quantity of urine — & constipation of the bowels — pulse variable — The tumour (generally after some time) commences in the Epigastric region which increases — untill the whole belly becomes swollen & tense — feeling gently on one side of the abdomen & striking the other a fluctuation may be perceived of the contained water in some cases the fluctuation may be heard — — —

Diagnosis — from pregnancy — tympanitis — & encysted dropsy by the marks mentioned already — — — — —

It has been confounded with pregnancy by the most able & experienced Physicians Dr Physic & himself saw a patient — proposed tapping the following morning

as Dr P was unwell — the lady that night was delivered of a fine child — numerous other cases might be mentioned —

Cause the same in general as those of Anasarca — but it arises more frequently from visceral obstructions & derangements from continuous inflammation — there is another cause which has not been noticed by any writer — — the patients in these cases are as much disturbed by ~~the collection~~ flatulence as the collection of water — this with the circumstances induce me to think the blood vessels secrete some kind of a gas by a process not understood which is condensed into fluid — forming the opinion of Dropsy — that the blood-vessels do in some instances secrete a gas has been proved by Jno Hunter — ——— unfelt perspiration or perspiration turned in — a cause — general Pettigrew from suppressed perspiration by entering a hot bath whilst heated in 1½ hours had dropsy & in a short time died of universal dropsy — under the care of Dr Physick — has been a patient at night with flatulent colic — received him — called the next day & he pronounced under my self universal dropsy — as much distended as I have ever seen any one — relieved & cured by Diaphoretics & cathartics — principally by a mixture of Laudanum & Spes. Nit. dulc — & c — & antimonial wine — this formerly spoken of — for the treatment in general I refer you to Anasarca

active pulse & febrile action V. S. & repeat as long as febrile

as arises more greatly than Anasarca arises from visceral congestion remains & take considerable at once — topical — gestion. it will be proper & necessary to resort more early V. S. followed by diaphoretics have been of great use to me — in combination with squills & digitalis — must be used — the abdomen was tender & painful slowly introduced otherwise we do injury — & render the disease more difficult of management — when the debility is very great should not give it internally — but use it in friction — & c externally

1st indications are to promote the evacuation of the fluid & change the morbid action of the vessels

Emetics only to relieve a sick stomach & c they have gi

cases of extreme weakness we are forbidden its use we must then resort to Nitric acid — It may be laid down as a rule wherever Mercury is indicated & we are from the debilitated state of the system prohibited using it — Nitric acid is the proper substitute

The distention becoming painful & not yielding to remedies must resort to the direct mode of evacuating the waters viz — by tapping — should bandage the body tight after the operation of evacuation of the waters Dr Fothergill inlists much on tapping — it is of advantage

Should always apply a blister to the whole abdomen before tapping — as this of itself has evacuated the waters ——

Encysted Dropsy

When the water is contained in an hydatid or in a sac — attached to some particular viscus — Diagnosis — there is no general dropsy shall treat of Dropsy of the Ovaries — here the case is sometimes alone ^ debility as in anasarca — & the swelling is local & inclined to one portion of the belly — the thirst not so great — nor is menstruation or conception injured as in the case in anasarca nor is the urine less — nor altered in its properties.

Prognosis, for advanced seldom cured

Treatment as in anasarca — I may say the mercurial course is alone to be trusted — the tumour is commonly cystinous — blisters are of great benefit — if the tumour joints & is inconvenient it soon again accumulates out puncture it & evacuate the water — the case is very obstinate & seldom yields to the best treatment — ^ in the commencement bleed & blister here may cure — the the mercurials & narcotics as cicuta,

Hydrothorax

+ generally occurs in the aged & infirm

The most formidable of the various forms of Dropsy & the & takes place gradually most apt to be confounded with other diseases

The effusion is generally in only one pleura sometimes in both — at other times only in the cellular membrane of the lungs — forming Anasarca pulmonicum & in sometimes in Hydatids — the quantity of effusion is various from pints to qts.

Symptoms a sense of oppression & tightness about the Scrobiculus Cordis — increased by exertion — the patient cannot rest well in a recumbent posture — the breathing is difficult — there is cough at first dry — afterwards expectoration of the glairy phlegm or lymph — the patient often awakes suddenly — with oppression of the precordia & palpitation of the heart — the urine is in small quantities & high coloured — the pulse at first natural as the disease advances becomes active unequal & intermittent — the face is pale — countenance anxious with livedness about the eyes & lips — ~~the cough at first dry~~ more or less dyspnœa — there is numbness of the arms extending from the heart — a respectable physician has informed me that he has observed as a general concomitant of the disease a sense of stricture of the wrists there is difficulty of deglutition — one side more affected than the other — the patient will lean to that side — or the side may appear larger to the eye — & may be measured

Fluctuation of the fluid may often be discovered by the patient & physician — if the effusion is in the pericardium the heart is more disturbed than in other cases & the feeling of oppression is more confined in extent — — — — — —

there is at times paroxysmal dyspnœa resembling periodic asthma

if the right side is affected the right leg, outside of it, will be anasarcous & vice versa — but anasarca will in the course of the disease become general —

Diaphoris – from Emphysema – Angina Pectoris – Asthma organic affections of the heart & large vessels & certain dis-eases of the stomach – the diagnostic of Hydrothorax according to Corvisart & Bichat are – If the sternum is struck the fluid recd – a fluctuation will be perceived – & pressure on the abdomen increases all the symptoms – especially the sense of suffocation – says Bichat – I percussion the sound on the side containing the effusion will be inelastic & dull – however not certain as the same sound occurs in hepatitis &c – the voice though the stethoscope is sharp & naturally / ill cured pneumonic inflammation – the aged – asthma angina pectoris – misplaced gout – & organic affections of the heart – sud-denly repelled eruptions

Cause – the same as the other forms may arise from

Treatment – is general the same as in the other species & may be connected with a tonic & an atonic state of system

I believe it to be mostly of a highly inflamatory character as shewn by the causes & pulse – pain in the chest or side – appearance of the blood drawn & the indications considerations

the first indication is to bled & must repeat until in-flamation or local is subdued – the pleura is generally inflamed & V.S. in the affec-but with judgment – as the pulse will continue to indicate remedy action till the last stroke – V.S. not admissible in cases of pleurisy must use cups between the shoulders & at this time large blister – to the thorax – as one heals & fly another then not succeeding must resort to diuretics or in an moderate salivation of service very moderate & increasing gradually area – do not esteem digitalis as of service here – nor do the Philadelphia physicians – it is supposed to be better adapted to affections of the heart than genuine Hydrothorax

Dr Ferriers prescription is ℞ – Extract Elaterium 1 gr – Pills White Dulc ℥ 3 – Fine Squilla ℥ 3 a g.s. – Syrup of Buckthorn ℥ 3 – Bi-carb of colchicum ℥ 3 a g.s – Mix – dose ℥ 3 – 3 or 4 times a day with this he informs us he has done more good than with any other prescription – from confidence in Dr Ferrier I keep it a year – attention is excellent – – – – / but if the chest is full of water we will hear no sound &c

Emetics are purging are of service in this case in the 1st
only to relieve dyspnoea
case of women if of good constitution or even midling purging is of
Let me press it on your attention that the disease in the first
service & must be the drastic ones as gamboge &c women stand the operation
place is highly inflamatory — you must therefore act it accordingly
& medicines better than meat & the far more tenacious of life
I have found it fearfully not as manageable as the other dropsies
Diet — depends on the state of the system — entire abstinence alone
has cured it — in atonic dropsy the diet must be generous —
As to drinks much has been said — they are necessary as
much of the effect of the diaphoretics depends on their dilution
should not be taken in large quantities — but often & little at
each time — water is good — or water & hard cider — or
in some cases — weak gin & water — this last is eminently diu-
-retic — To prevent the return of the medicines do not
accomplish this as that is the tending of most of them — we must
resort to tonics as the Bark &c — —
Mercury gradually introduced as an alterative — debility too great
use Nitric acid — exercise is by no means to be neglected
I have known the sawing of wood cure it
I should have mentioned that dropsy is more manageable
in children than in adults.

Hydrophobia — more urgently demands T.S.
than Hydrothorax & absolute rest & the drastic purges are
the best when we purge as the elater & croton oil & gamboge
expectorants are used merely as palliatives as the squill
senega &c
the lactuca virosa lately strongly recommended
for tapping should only be resorted to evident fluctuation —
the pericardium has been tapped & a cure followed
the water may be held in cupts & after tapping the water will
not flow — Ohap. says he never cut into the pericardium
but wounds pierce it with a needle as accupuncturation & should

Hydrocephalus Internus

Hydrocephalus is a dropsy of the brain — it may be caused by falls — blows tumours — scirrhosities & ossifications or articles that act on the alimentary canal or chylopoietic viscera — such as constipation — Worms in the stomach &c — The European thought the disease incurable — contra Rush & Stevenson it is generally supposed at present to be a symptomatic disease & must be treated antiphlogistic — stimulating — stomach must be kept in a state of quietude — Purgatives & emetics only in the first stage — & after proper depletion — daily purging — if cold water applied to the head & sinapisms to the feet — when appears takes place the symptoms often sudden & subside — you may then look for danger — ~~[illegible]~~ shave the head & blister the whole scalp & let it on 36 hours or until suppuration takes place otherwise they will be severe strangury — more vesication of little indeed of no service when applied to the head — Prognosis if the more violent symptoms subside in 8 or 10 days I should fear the disease would be fatal — fair if the neck fatal & indicates that the base of brain is affected & this part is more dangerous when inflamed than when the top of the brain is affected — very copious — The Mercurials are highly beneficial given in the stomach & applied over the whole body in the form of inunction — generally purge — If diffusion occurs from the nose — tartar — glove &c. The gums affected the disease yields — all is well & take place what may the nose dry there is great danger — Dr Warton has seen it used in 12 days on a child of 4 years old — mercurial ointment very strong was rubbed on & kept to the head in a cap at the time — Dr Warton then cured one of his own children — must introduce it as fast as practicable in every instance — as soon as the gums are affected wash the child in warm water & put her in bed

Hydrocephalus is sometimes the cause of debility as the tumid abdomen & scaly urine &c & to be treated accordingly — ——— Emetics often do good when the stomach is found to be foul — Prognosis has been ill. Hydrocephalus and fatally in 3 days & these have been called water strokes — but more properly they might be considered apoplexies — the disease is one of great danger

It attacks are preceded by pyrexia - loss of appetite
Nausea - Vomiting - dry tongue - throbbing of the temporal arte-
-ry - Tinitis Aurium - active irregular pulse
Divided into 3 stages - 1st - pain in the head - sickness of the
stomach & great aversion of light - 2nd - diminished
sensibility - watery clay stools - bowels constipated -
pupils dilated or contracted 3rd Paralytic - rigidity or stubborness, rol-
-ling the head tossing the hands - delirious, spasm con-
-vulsions - diminished pulse irregular at times &c & only can bear the recum-
-bent posture - take up the scream or paint - this is peculiar
Dr Chapman says the apoplexia takes place from the previous
-bid action & the proximate cause is the congestion & atte-
-d state of the vessels of the brain - - - - - - - -

Children are thought to be more liable to it from
the comparative size of the head & the soft state of
the brain & the head is more liable to be injured by
falls &c & perhaps rocking the child thus tossing its
head about - which is often the base part of its body
has seen it arise from extreme emotion about
the ears being suddenly repelled by strong washes
symptoms tenderness & fullness of the scalp - belly
tumid, at least there is quite regular & the stools & the covered
stools green - child very restless &
by an oily surface is pathognomonic of hydrocephalus
will disclose itself shortly in fever - then there is acute
head ache - pain & stiffness of the nape of neck &c
nausea & vomiting - aversion to light - dry nostrils, pulse
active & sometimes irregular. fever remittent - towards
the close spasm of one limb or one arm - great emaciation
the urines, the eyes half open covered by a film, see above
General treatment - to keep the patient sick willents to the bowels extreme
ties - is now considered a good practice

the head becomes in some congenital cases before ossification occurs the
brain is a sack rolled up in stuff - - the water merely divides the substance
remains & hence the nerves remain - compression has been re-

commended by adherence of the lips & are said to be very useful must be repeated every day in very advanced stages the membranes & report of its success — cases are reported of its success — gradually & operate with a couching needle — must often repeat

Scrofula

Usually appears between the first & fifth years of life. often however in more advanced life — but rarely after the age of puberty Symptoms — small hard tumours forming in the course of the Lymphatics — particularly on the neck — there remain some time stationary — but at last inflame & suppurate — at first discharge pus soon changing to a serous fluid — like the coagulum of milk the tumours change — the openings spread — forming ulcers then gradually heal — while others appear going on then perhaps for several years — until at last the disease subsides always leaving behind it indelible marks of the ulcers causing great deformity — This is the most favourable form of the disease — sometimes several different parts are affected at once — the ulcers discharge a sharp acrid fluid & shew no disposition to heal — the eyelids & eyes become inflamed & opacity of the cornea is not unfrequently produced — the joints are very apt to become affected — they swell & great pain is experienced on the least motion the tumours increase the limb wastes — ulceration takes place & caries of the bone — Hectic fever supervenes & the patient dies or recovers with an anchylosed joint —

Dissections shew the viscera diseased — the glands of the Mesentery tuberified & often ulcerated — & the lungs studded with tubercles

Causes It is hereditary (more frequently it is said from the Father) communication we know not how — from Parent to Child

& may lap off for several generations & then again appear-
-ing ---

The Strumous diathesis or predisposition to scrofula is associ-
-ated with peculiarities of constitution — the child generally exhibits
in personal beauty & precocity of intellect — is of a delicate habit
with light hair — rosy cheeks — fine soft skin — blue eyes — with
a wide pupil & particularly with a swelled lip — divided in the
centre by a deep fissure — But there are causes so influen-
-tial in exciting the disease that some have considered them suffi-
-cient to account for its origin — independent of Hereditary pre-
-disposition — these are climate — weather &c — the extremes
of temperature are equally adverse to its existence — It pre-
-vails therefore in medium latitudes — where the climate is
moist & variable — there it is very common in Great Britain
but is found in but one section of the U. S. along the sea coast of
the Eastern States — prevails most in the spring disappears
in the summer — Temporary exposure to moisture as
in damp situations or in wet clothes — all causes which pro-
-duce general debility — low pernicious diet — ill ventilated
apartments — inattention to cleanliness &c — illustrated by
the great prevalence of the disease in the Manufacturing
towns in England — Scrofula is developed in the system
by the action of certain diseases — Jno Hunter tells us that
syphilis has this effect — we are told the same of small pox
& probably all the Exanthemata — common accidents — which
make a strong impression on the system may also awake
Scrofula into action — As to its being contagious

there — no ground of foundation for the opinion — experiments have shown that it cannot be inoculated so as to communicate the disease ——— Every point however with regard to the disease — its origin — its nature & its mode of propagation is con-
-tested — The Humoral Pathologists supposed it to arise from a acid condition of the blood — but there is no such condition of the blood —— Cullen believes that it depends on some morbid condition of the Lymphatics — The doctrine of Carmichael which I believe to be the most correct view on the subject — is — that Scrofula consists in a highly disordered ~~state~~ condition of the whole digestive apparatus Assimilation & Nutrition beginning in the stomach & progres-
-sing thence to the lymphatics — which ultimately become much de-
-ranged — so much so that I have considered them the chief seat of the disease & treated it accordingly — that this is the true Pathology of Scrofula is seen by attending to the history of the causes — Symptoms & cure of the disease

There are two stages of Scrofula — The first is that which is called occult — in which there is no tumour — ulcer or any local af-
-fection — — yet the system is sufficiently disordered to excite great solicitude — here we should recommend the remo-
-val of the patient beyond the sphere of action of the causes which exert so powerful an influence in exciting the disease — The Diet — Clothing &c must be attended to The alimentary canal being much disordered as shewn by the loss of appetite — Nausea Furred tongue — Indigestion & constipation of the bowels — I give Purgatives notwith-

- standing the apparent debility & repeat them every 3 or 4 days
for several weeks — the evacuations are always dark & offen-
-sive & in proportion as the foul matter is removed - the
patient gets better - Emetics are not of much consequence
unless there be thorough evacuation — We resort to Tonics
the vegetable bitters - the Bark either alone or combined with
some of the Chalybeates - is excellent - the cold Bath - particu-
-larly sea-bathing has been highly recommended but it has
often been productive of much mischief — this may be ex-
-pected when instead of a glow on the surface chilliness & lan-
-guor are the consequence of its use - here the warm bath must
be employed & its efficacy may be increased by adding salt to it
The skin which is dry & scaly in this disease is restored to its
healthy state by the use of the warm bath - & this remedy
is also useful in preparing the system to receive the cold
bath — almost always when the cold bath disagrees at first
we may return to it with advantage - after using the warm
bath awhile We must (as Jackson wrote pg) awaken
the susceptibility of the system — by thus arousing the en-
-ergies we allow it an opportunity to react after the ap-
-plication of cold — among the Prophylactics Diet is
one of the most important — It has been much disputed
in Europe whether the animal or vegetable diet is to be
preferred — I am surprised that there should be any doubt
on the subject — the one or the other becoming proper acco-
-rding to the circumstances of the case — as a general rule
the diet should be of the lightest meats — with the farina-
ceo-

-cea & a large proportion of milk — Exercise is servi-
-ceable particularly when taken on horseback & by rides in
the country if urged to the extent of fatigue & exhaustion
however it has precisely the contrary effect — In this way
it has been known to excite the disease

Immediately after forced marches or a hard fought battle (a late
writer tells us) it is not uncommon for a number of British sol-
-diers to be directly seized with Scrofula — as cold moist weather is
one of the causes of this disease — we must carefully guard against
it by warm clothing or by confining the patient to his chambers
which must be of a agreeable temperature or if his circum-
-stances will admit it — he should remove to a warmer & more ge-
-nial climate — at least untill he has passed the age of puberty

We come now to the second stage of Scrofula in which
the disease is fully evolved & tumours & ulcers have formed
In the treatment must employ general remedies & local applic-
-cations — Evacuating the bowels by purgatives in this stage is of
great effect in this stage also — not so much to get rid of
accumulation of peculent matter as for the purpose of redu-
-cing the inflamatory diathesis — Contrary to most European
practitioners I am of opinion that we purge too little in
cachectic diseases — influenced by the appearances of debility
But there is febrile diathesis present & it must be removed
by evacuations — which so far from weakening the
patient actually invigorate him — I have several times seen
white swellings cured by long continued purging & it is usu-
-ally conceded among us to be the best practice in Morbus coxarius

or disease of the Hip Joint — In plethoric habits it also produces the dispersion of the tumours of the Lymphatic glands — but to obtain the good effects of purging it must be steadily persis-ted in for weeks & months together & repeated 2 or 3 times a week In this way I have seen cures frequently made — In the state of things of which we are treating V.S. is not unfrequently demanded — by the state of the pulse — by the inflamation of the tumour & by variety of other causes — We next resort to Mercury — introduced gradually — that an impression may be made on the constitution — It must be carefully watched as at times it will do great mischief — It is not easy to designate the quantity: I have generally found ½ gr 3 times a day for several weeks answer my intention — but some practitioners to add to its alterative properties — com-bine with it some Antimonial or Sulphur — but with this I have no experience — If there is much pain & irritation present add to the calomel — Cicuta or Opium — Topical — when the tumours are inflamed — bleeding by leeches will be proper — with the use of the ordinary disentients — which in the first instance should be of a cooling & sedative nature — The tumours becoming indolent or inactive — we must then use Mercurial un-guents — lotions with salt water — camphorated solution & other stimulating washes — Blisters are here serviceable & an ointment made of Euphorbium — has been said to have been of advantage — ℞ Euphorbium 1.3. Axun-gia 1-3 — Sometimes we cannot by these means

procure disruption of the tumours — but poultices &c are of no use in promoting suppuration & by relaxing the parts make the pores which ensue more difficult to heal — when matter is forming it will then be proper to wash the parts with hot spirits as Rum or Brandy

It has been questioned whether it is right to open a scrofulous ulcer — as by some it is supposed that the matter secreted is made acid by exposure to the air — I think that we should always let out the matter — when it is (as is not uncommon) a milky-curdy serum the opening does no good — but when pus is actually secreted it is of much service — If there is a diseased condition of the whole system the situation of the patient is much worse — as many ulcers then exist at the same time some Phagedenic others indolent — Numerous are the remedies which have been recommended ~~during~~ in this state of things — during the reign of the Humoral Pathology — the alkalies were employed on chemical principles & they still retain some of their former reputation — they do no good but by neutralizing the acid which may be present in the stomach — the same is to be said of lime water Two new remedies have been highly extolled — Muriate of Barytes & Muriate of Lime — but they have lost their reputation & are no longer prescribed they make no impression on the disease but distress the patient by the nausea they produce — Better effects are to be obtained from the narcotics — & the most vaunted to is cicuta — has lost some

of its reputation — my experience is in its favour — I have found it in every stage of the disease — to relieve pain & to put the system in a state favourable to the healing of the sores — to be of any use however it must be given liberally — beginning with small doses & increasing rapidly — till one ounce of the extract is taken daily — This is not among us a uncommon dose — The rule is never to stop increasing the quantity — until it sensibly affects the patient with giddiness & other nervous ~~affections~~ symptoms — Stramonium may be used when the cicuta fails & here it has sometimes cured — in protracted cases it may be better to give them alternately The Beladona & Opium are serviceable — The Dulcamara is in some cases very important — the utility of opium especially where there is much irritability has never been doubted — It is often right to unite it with some of the narcotics — some one of the Mercurials & tho' calomel is to be prescribed in the first stage yet here Cor Sub is acknowledged to be of the highest utility — The combination of Cor Sub. with the narcotics is an almost universal prescription — To meet the same indication as the narcotics various diaphoretics are employed — under the appellation of purifiers of the blood — The Sarsaparilla — Gum Guiac — either alone or combined ~~with~~ using the Lisbon diet drink have been much used — Arsenic has of late been much used In the advanced stage the sores seem to get well the soonest under the mildest treatment — as weak lotions of Lace-Salumi — pott water & simple water applied constantly

steadily by means of clothes - if any unguent is necessary use the simple cerate - Sometimes they assume a more malignant character - If they are indolent & languid must make use of stimulant application - & probably the best is Vit. alba - The proper proportion of Vit. alba is 13 to 8 3 of water a saturated solution has been used but I have always found it too irritating - sometimes these sores so far from being indolent are precisely of the opposite character - throwing out fungus &c these must be restrained if the milder means fail - by the most active measures - some of these counterfeit cancer resembling it in all its appearances - here the narcotics the Dulcamara & the Nightshade is of advantage - cloths wet in a solution of opium may be applied on the part this will at least give ease & comfort

One of our indigenous vegetables (of late) has acquired great repute for its efficacy in scrofula I mean the Persicaria - of the decoction as much drank as the stomach will bear & the ulcers at the same time washed with it - I have had no experience with this I rely on your however the Nitric Acid with the utmost confidence - it has fallen into disuse in Europe from having been given in too small doses - for several years I have trusted to it principally in scrofulous cases & have hardly failed to cure in a single instance or at least to give very great relief with it - It is best adapted to the disease in its open form & in its advanced state, when it is connected with a cachectic ~~habit~~

state of the system & with inveterate ulcers – during this period of the disease 3-3 or more of the acid should be given diluted daily & the sores at the same time washed with the dilution – Even of ulcers which if not genuine cancer yet so closely resemble it as to be easily confounded with it – I have seen 30 or 40 cases cured – A case of a woman pronounced incurable by several most respectable physicians Dr Hewson & Myers at my suggestion gave her as much Nitric acid as she could take & washed her sores ~~externally~~ with it & dressed them with citrine ointment – In a few weeks she was perfectly cured – The other was the case of a woman in the worst stage advanced in life – She had lost her nose by ulceration & but was by this treatment cured in a short time – whether there were cases of cancer or Scrofula I do not know as the line between the cases is not distinct – Dr Jones of Richmond has communicated to me two unequivocal cases of cancer which he cured with the nitric acid – –

After the disease has been reduced – we must restore the tone of the system – by tonics &c – of these bark & the Calybeates have retained their standing – through all the varieties of caprice & changes in practice that have taken place – the tonics not succeeding as a dernier resort must employ sea-bathing – –

Beside the parts (the neck) already mentioned this disease attacks almost all parts of the body & particularly the glands – ~~also~~ the testicles of the male & mamma of the female more particularly for the history & treatment of these I refer to the Professor of Surgery

Cutaneous diseases

common division of the diseases of the skin into chronic & ~~contagious~~ acute
this is defective — take from the contagious equally so
Willan division generally received but it is so artificial
as to be of no practical use — he sets his division on the
appearance of the eruption in its most perfect state — it
discusses to be studied ~~though~~ to complete be remembered
though as they are constitutional or as they depend on the skin
itself — 1st depend on some internal irritation — which
discharges by the skin through sympathy. the irritation com-
mencing in the mucous membrane of the intestines is not thus
fused by continuous sympathy — but the skin assumes
a vicarious office & there is a sort of metastasis

Exanthemata

The word is derived from the Greek (εξανθεω) signifying to bud or spring forth – to this class belong Small pox – Chicken pox – Cow pox – Measles – Scarlatina – Erysipelas & a few others of minor importance – Cullen has improperly included pestilential plague – a complaint that belongs to a different class. That Small pox – Chicken pox & Measles are contagious there is a difference of opinion – but as respects Scarlatina & Erysipelas the case is very different – the last is certainly not contagious & the former rarely if ever & by each the same individual may be affected a second time – This is so striking the fact with respect to erysipelas that one attack seems to invite another & prepare the way for it – Chicken pox is not like small pox & Cow pox regularly propogated to inoculation – but most people believe that the contagion is equally evident – It however spreads more in the character of a circumscribed Epidemic than as a contagious disease – It attacks a family of children & even the children of a whole neighbourhood & is most prevalent when there is a vitiated state of the atmosphere. Not often if ever does it attack in regular succession as if propogated from one to the other through the medium of contagion. If the same person cannot be affected twice with the real eruption of Chicken pox – he can by a varioloid affection strongly resembling it – There is no accurate distinction between the two – To this Cullen Diagnostics do not apply

Thirdly - that they are propagated by contagion (meaning the Exanthematous) & incident to the same person but once during life - That these two circumstances are attached to several of the Exanthemata is true - but to others it is inapplicable - Few complaints shew more this gastric origin than the exanthemata - this is particularly the case with respect to small pox - Measles - Scarlatina & Erysipelas - In the commencement of Small pox the stomach is principally affected - this is so evident that the amount of gastric affection - affords certain ground to calculate the violence of the disease - hence the confluent Small pox was introduced by incessant vomiting & other gastric affections the complaint in these cases seems to be concentrated in the internal parts & consequently the eruption is defective - the same may have been seen where poisons have been swallowed - when a few exanthematous eruptions take place of the original affection if it is removed

the simplicity relieves the eruption but the eruption disappearing the person becomes deadly sick

I know a lady a few years since eat of a Rock Fish a little tainted - it produced a great gastric distress - which subsided on the breaking out of an eruption on the skin

There are other reasons for believing Small Pox of a gastric origin - It is proved that the poison of Small-Pox cannot take effect unless the cuticle be previously divided or removed so that it may produce local irritation

I will not now detain you in difusing the once prevalent (now abandoned) doctrine that the variolous matter is absorbed through the round cuticle & con-

the same lady during 2 or 3 years afterwards at the house of a friend the first thing met her eye was a rock fish - from affection she again immediately had an eruption over her whole body

-veyed into the circulation I am content to let such an hypothesis sink under the weight of its own gro-
-ssness — In the case of the Small Pox making its attack upon the internal parts the Lungs are but slightly if at all af-
-fected - the stomach is the the only part to which we can have access constituting the primary seat of the disease Were the poison taken into the blood & diffused through the system it would be no ~~matter~~ moment at what point it was introduced - In Man & other Animals similar to him the blood passes through the heart - if any part becomes vi-
-tiated - the whole is necessarily so - wherever we might introduce the virus & the disease would in every case be the same & hence the difference between ca-
-sual & inoculated Small Pox would no longer exist but admit that it does not pass through the circulation but that the derangement is through the medium of Sym-
-pathy — the symptoms of the disease will be violent or otherwise according to the organ injured — hence inoculated Small Pox is free from danger the casual the contrary The seat of the disease is on the mucous Membrane of the Prima Via generally in the stomach & abdomen &c

Calculous Affections

For the symptoms of these complaints I shall refer you to books — What is the cause of the Lithic Diathesis or the tendency in the system to the formation of stones — we do not know. Its connexion with gout is very evident & the latter depends in a great measure upon the condition of the stomach the former upon wrong action of the Lymphatics & Arteries certain habits of life — as sedentary occupations of the student — the indulgence in voluptuousness & debauchery are alike the consequences or source of the disease — But by a reference to the analogy that exists between gout & calculous affections — little or nothing is added to our information respecting the latter — But it is evident to my mind that the first link of this scourge of our nature & the reproach of our profession — has its origin in the stomach (gastric origin) — It is allowed that gout is owing to matter arising from a depraved state or condition of the digestive organs & this is not wholly a gratuitous supposition — nor is it less true — that this matter is taken up & conveyed into the bladder — where it constitutes the formation of calculous matter — for this we have many reasons & among others it is well known — that there is a similarity between gouty concretions & calculous substance — Chemistry had no sooner made its way into Medicine — than it began to exercise its ingenuity in ascertaining the nature & origin of calculi

but even with the assistance of all its resources — Physicians have been baffled in their inquiries — Nevertheless it has been ascertained that various substances enter into the composition of this matter & agents that have the power of dissolving them — at least out of the body — have been pointed out to us — The Substances — are as follows — 1st The Uric Acid — 2nd Phosphate of Lime — 3rd Magnesia — 4th Oxylate of Lime — 5th Phosphate of Iron — 7th Urea — 8th Scilla — 9th Animal mucus — These elementary substances exist in various combinations — which have been variously arranged — Wollston divided them into four classes — the 1st Uric Calculous — having for its basis Uric acid — 2nd Phosphate of Magnesia & Ammonia — 3rd Oxylate of Lime 4th Bole Earth — the basis of which is the Phosphate of Lime Endeavours have been made to discover solvents for these several species of calculi & the French have made many successful experiments on the subject — these experiments were instituted to shew that substances capable of dissolving calculi out of the bladder — might be introduced into it for the same purpose — The results were as follow — The Uric calculi are soluble in a solution of Potash & soda — so weak that it may be held in the mouth & swallowed without inconvenience The Phosphate of Magnesia & ammonia & Bole earth — may be dissolved in Nitric & Muriatic acid so diluted as not to irritate the bladder when injected into it — & the Mulberry ~~Nitric acid~~ Oxylate of Lime — may be dissolved in Nitric ~~or Muriatic acid~~ or a solution of Carb of Potash

The Gastric juice is most powerfully solvent for every species of Calculi — Nor is it contended that these solvents — when introduced into the bladder — ought to act on the stone in the same manner — that they do out of the body & why this should not be the case we have no reason to give — Experiments do not afford us much encouragement — tho' perhaps they have not been conducted with that care & skill which are required — as yet we do not know that any benefit has resulted from the French discoveries — but from the fact that the different species of calculi are soluble out of the body — we ought to be stimulated to further exertions to discover — whether the same effect ought not to be produced in the bladder — Cases have certainly occurred in which the stone has disappeared under the use of Alkali — they are to be met with in old Medical records & even in very recent publications — — I do not know whether the solution of the stone ought to be ascribed to the medicines or simply to the operations of nature — But taking all things into consideration — I am disposed to believe that certain articles are capable of dissolving the ~~stone out of~~ calculi of the bladder — The practice in the case is extremely ambiguous & of the difficulties it is not the least to determine the composition of the stone — that we may apply its appropriate solvent — on this account we are obliged often to proceed empirically — trying

one solvent after another - untill we have found the one suited to the case & the particular species of calculi - which may be in the bladder - That the stone may be dissolved in the bladder in this way I infer from these facts - first - We have solvents for it out of the bladder & these may be given in sufficient quantities without producing injurious effects Second - & some of them do reach the bladder without being materially changed from - the state in which they were administered - Nor is this inconsistent with the doctrine I formerly held forth to you - that no article enters the circulation without being perfectly assimilated - for when they once get beyond the sphere of vital energy - as in the secretions & excretions - they appear regenerated - tho' the chemical action & beside which there is a direct communication - between the stomach & the bladder thro' which our solvents may pass

The fact of the rapid transition of some substances from the stomach to the bladder - had long ago led to this supposition - We all know that in 20 or 30 - minutes after turpentine has been taken - it will be detected in the urine & this in too short a time for it to arrive at the bladder thro' the vast of the circulation - You all know that Dr Darwin accounts for this upon the Hypothesis of a retrograde action of the absorbents - this is however a very lame attempt at an explanation - for admitting the substance to be conveyed in this manner - it is obvious that the absorbents must be in a diseased state & it is contrary to the rules of medicine to resort to a morbid process to act upon the healthy functions

of the body — But in whatever it may consist there is no doubt of the fact — that there is a direct communication between the stomach & the bladder — The Kidnies have been completely destroyed & still the bladder had a quantity of fluid — not urine for this is a secretion peculiar to the Kidnies — — Sir C Hom after evacuating the stomach of a dog passed a ligature tightly around the pylorus & after causing him to fast for several days — he injected into the stomach a quantity of liquid coloured with Rhubarb in 30 or 40 minutes after it was found in the bladder — which is much too short a time for it to pass through the circulation Experiments of this kind have been so often repeated with similar results that we can have no doubt of the fact — — — — — —

Treatment of Calculous Diseases — of the medicines supposed to possess the power of dissolving the stone in the bladder the carbonic acid has been long known — its utility was never well illustrated untill Dr Dobson wrote on the subject about 30 or 40 years ago — since which Mr's Saunders & Percival have insisted on its powers it was proved by Wall that Mott liquors were capable of dissolving the stone out of the body & to this point experiments have again & again been repeated by Saunderson Percival — Pearson — Foulkner &c. & there is no doubt that the carbonic acid possesses the power of dissolving calculi of the bladder — The next point was to ascertain whether the medicine entered the organ unchanged — By Percival it is related that the urine

-ing of a person who had taken it — precipitated them from lime water & dissolved a calculous that was in it There is no doubt of this — since it appears by good authority - that calculi are dissolved by allowing them to remain in the waters of Spa & that by being immersed in the urine of those who have drunk of them - the same effect will be produced — However I shall not insist on the certainty of Carb-acid — our acquaintance with it is very imperfect - tho' enough is known of it - to warrant our perseverance in its use - Few are the cases in which I have tried it - but as a palliative - it is in the greatest degree respectical — I have used it with great advantage in Gravel & Nephritis — I have found the Seltzer water - taken ad libitum - as good as any of the forms of it - tho' the aerated Alkaline waters prepared by Wattes apparatus - is commonly employed - if neither of these can be had - a good substitute will be the Saline draught — or swallow a solution of the alkali first - then the acid — this should be repeated 3 or 4 times in a day — the idea that calculi depended on an acid in the stomach gave rise to the use of alkalies in this disease Dr Robertson recommended the Sal-Tart as a solvent for the stone - other writers notice the alkalies but they were laid aside & about 30 years since were again introduced & their utility confirmed by experience — In solution the Carb. Potash — may be given in the dose of 15 or 20 grs (increased if the stomach will allow it) night

& morning – but if it is like to produce gastric distress – we are obliged to discontinue it for a time – as a palliative the Carb. Soda – is not less beneficial than the former – 13. to a quart of water may be taken daily – they may either of them be given in the form of soap – The Aqua calcis is nearly allied to these – I have often used it – & with great benefit – if not a solvent it is certainly one of the best palliatives for the stone – given freely it completely relieves the symptoms for a time – A case is related by Dr Home in which a patient took 8 oz – gts in six months & continued free from pain for several years – altho' the calculous remained

In order to be efficacious it should be given in large doses as a pint or a pint & a half – but generally a much less quantity is sufficient – Leaving the Alkalies I proceed to another set of remedies producing opposite effects – I mean the Mineral Acids – of the goodness of these we have ample testimony – Lately Mr Copeland has made comparative trials with the Nitric & Muriatic acids & gives preference to the former – In the first case in which he used the acid – having found – by sounding – that there was certainly a stone in the bladder – he gave the Muriatic acid in the dose of 30 gtts twice a day – gradually increased to 50 gtts – until 11.3 had been taken – when the complaint was entirely cured. The urine which had been discharged had been collected & preserved & the sediment which had been deposited amounted to – 104. grs. of an impalpable powder – this was the stone which had been felt in the bladder –

In the second case 12-gtts of the Nitric acid was given 2 or 3 times a day untill 28.3 of the dilated acid had been consumed - the sediment which had been collected for six months - amounted to 500-grs - towards the conclu-sion fragments were discharged & no calculi remain-ed in the bladder - of course these acids have the power of dissolving the stone in that viscus - I have now completed what I had to say on those substances which have the power of dissolving the stone - at least out of the body - The practice must be em-pirical as we have no means of determining a priori what the composition of the calculi is - & therefore do not know the solvent suited to decompose it

I shall now speak of a class of medicines which are capable of relieving the symptoms that attend & preventing the formation of calculi - All the bitters & astringents (perhaps without an exception) may be included under this class - but particularly the genus Lupulin - Gentiana & Uva-ursi - It is said that tea is a powerful remedy of this class - in China where there is a great consump-tion of it calculi are unknown - we are told - - Astringents have been used from time immemorial & some have said that they will dissolve the stone - but they have no such powers - Their Modus Operandi is not well known to us - Cullen supposes that they act by absorbing the acid in the stomach - upon which the formation of calculi depends - but in this I am sure none will

cepted with him - To me it appears that they act by im-
-parting tone to the stomach & thus preventing the generation of
the acid - the increase of the stone being then arrested - its
asperities are worn off or perhaps covered with mucus & the
irritation it produced is diminished or altogether removed -
The Uva-Ursa - of all this class I have been most successful
with - it is now much used in this complaint & if not a pol-
-vent - is efficacious in mitigating violent symptoms - several
cases are on record - which have disappeared under its use
I have seen it given in stone with decided benefit - I
think it better adapted to gravel - The infusion of Hops
has been long known & by Lind it is stated that it possesses the
power of dissolving the stone out of the bladder - besides
relieving the symptoms when taken internally - My ex
-perience with it is limited to gravelly complaints - where I have
found it beneficial - it should be given in the quantity
of a pint of the strong infusion in 24 hours - At this lessens
the pains - promotes the discharge of urine & greatly con-
-duces to the comfort of the patient - Within the last
4 years much has been said of Magnesia as an antilithic
& to Mr Bland of London - the credit is due for its in-
-troduction - denying the possibility of dissolving the stone in
the bladder - he directed his enquiries towards ascertain-
-ing the means of preventing its formation - He institu-
-ted experiments with the alkalies & Magnesia & he
found the latter decidedly the best - In illustration
of its efficacy he published 4 cases - which I shall detail

The first was a gentleman 60 years of age who was in the habit of indulging freely in the use of acid liquors he frequently passed small calculi ~~with his urine~~ — ~~this~~ this his urine was found to contain a great abundance of a gropoly matter — he was treated with Carb Soda & Potash without effect — Magnesia was then given in the dose of 15 grs twice a day — with the infusion of Gentian In one week the uric acid was greatly diminished & finally disappeared entirely — the Magnesia was continued 8 months longer & a complete cure was the result — The second was the case of a Gentleman aged 40 who was accustomed to discharge with his urine a red pond & particularly when there was any irritation in the stomach — He took 20 grs of Magnesia night & morning — & in six weeks was cured
The third was the case of a Gentleman aged 43 — he had a painful affection of the kidnies & urethra — passed a small quantity of calculous & his urine deposited red pond — 20 grs of Magnesia every night cured him
The fourth was an old Gouty Gentleman aged 66 — who complained of great pain in the right kidney & whose urine was charged with red pond & a great quantity of mucus — 25 grs of Magnesia twice a day were given — ~~It~~ before the Magnesia affects the stomach so as to produce vomiting — 5 — the time of its must be added to each dose — the last was then cured —
although Magnesia is suited to Nephritic & gravel complaints it is proper to remark that it is not

prutio to the stone — Experience has shewn that these two complaints are ~~totally~~ materially different — Children are most subject to stone — upon which Magnesia cannot act — but is limited to gravel complaints — this Medicine is truly important — I add a few words on the management of a fever — Nothing can be more painful than this — when accompanied with febrile symptoms it will be proper to resort to copious venesection — the large doses of opium — much relief is obtained from it when taken by the mouth but a clyster of 2 or 3 drs of the Tinc Opii is better perhaps than any other remedy — & the warm bath is not to be overlooked — but should be used ----

effusion & extravasa

tunica vaginalis commences — condensed cellular — subtunica
Tunica vaginalis testis
Do albuginea & septa testis — beyond
in the corpus Highmorianum — each one 17 feet
testicle glandular part consists of the tubuli seminiferi &
each tube is left direct by the septula of the albuginea &
being convoluted in a cavelled stock, finally joined — vas
end in vasa recta in the centre of the testicle &
then called Rete testis ~~vasculosum~~ testis — from
Rouge page 8 on 18 ducts vasa efferentia going up
wards & backwards from the corpus Highmo
& tunica albuginea — each one is the convoluted
in itself conically forming the conus vasculosis — the tube of
each cone at its base centers the single tube of which the
Epididymis is formed — this is on the back of
testicle adheres by the tunica vaginalis — the ends
of the Epididymis are enlarged the upper Globus major
the lower Globus minor at the base of the the tube
is left convoluted turns up in inside of
Epididymis — & is called the vas deferens
900 — left 620 ft — diameter 1/200 of inch
tubuli seminiferi — vasa recta — Rete testis
12 & 14 vasa efferentia —) conus vasculosis — the
& Epididymis — & Globus major & minor — & the
vas deferens

tunica — vaginalis — albuginea — its septa &
the corpus Highmorianum

L 81